UNITED STATES DISTRICT COURT WESTERN DISTRICT OF WASHINGTON AT SEATTLE

DANIEL HOPKINS,	Plaintiff,)	CASE NO. C18-01723-MJP
٧.)	Seattle, Washington
v .)	October 14, 2020 9:00 a.m.
INTEGON GENERAL : CORPORATION,	INSURANCE)	JURY TRIAL via ZOOM
CORTORATION,	Defendant.)	Volume 7 of 7

VERBATIM REPORT OF PROCEEDINGS BEFORE THE HONORABLE MARSHA J. PECHMAN UNITED STATES DISTRICT JUDGE

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PROCEEDINGS 1 2 3 THE FOLLOWING PROCEEDINGS WERE HELD OUTSIDE THE PRESENCE OF THE JURY: 4 THE COURT: We have some things to do this morning. 5 6 First of all, Mr. Harris has plenty of time to deliver his 7 closing arguments. You, Mr. Wampold, have 102 minutes left. 8 I am graciously offering you the three You asked for 105. 9 minutes. Don't ever say I didn't ever do anything for you. 10 MR. WAMPOLD: Exactly. I'll remember it forever. 11 THE COURT: You should have received a copy of the 12 jury instructions that had some reworking done on them, and so I 13 hope you've all had an opportunity to go through those. 14 It would be my plan for you to take exceptions this 15 morning; put your arguments on the record. If there is any corrections that need to be done, Ms. Pernell is here. After we 16 17 have our final set ready to go, we will be emailing them to our jurors, and Mr. Cogswell will be taking the verdict form and 18 19 putting it into a fillable PDF so everyone can use it at the 20 time they go to deliberate. 21 So who is going to be taking exceptions for the plaintiffs? 22 MR. WAMPOLD: I will, Your Honor. 23 INSTRUCTION EXCEPTIONS

Okay. Mr. Wampold, first I'd like your

exceptions to what it is that I have given, and then exceptions

24

25

THE COURT:

to what I have not given.

MR. WAMPOLD: I'm not taking any exceptions to what you have given.

THE COURT: Then exceptions to what I have not given.

MR. WAMPOLD: I'm going to take exception to not having given our Instruction No. 8, which is based on the *Morella* case, and it's the one that states that -- where an insurer offers to pay a paltry amount not in line with the losses, that -- that that is a denial of benefits, and we think that should be given to create clarity about what happens in the context of a low-ball offer.

Do you want me to go on to the next one?

THE COURT: No.

I'll just, basically, say I understand your objection. Th instruction offered is not a standard instruction that's taken from case law, and you are certainly free to argue that position, but I don't believe it's necessary to state that in this case.

MR. WAMPOLD: Okay. Great. Thank you, Your Honor.

And the only other exception, and this is, really, just for our record, and that is excepting to the failure to give Instruction No. 24, which would have instructed the jury on the enhancement of damages. And I know Your Honor has ruled that that's for the court, but we're just preserving our record and excepting to not having given that to the jury.

THE COURT: All right. And I take it that there are 1 2 no exceptions to the verdict form as well. 3 MR. WAMPOLD: There are no exceptions to the verdict 4 form, that's correct. Thank you. THE COURT: Mr. Harris? 5 MR. HARRIS: Thank you, Your Honor. 6 7 In terms of the instructions that are given, we take 8 exception to No. 23, which talks about the equal-consideration 9 standard, and that's one that we've discussed previously on 10 multiple occasions. 11 So for those reasons we've discussed previously, we don't 12 think that's an accurate statement of the law with respect to 13 the UIM. I understand the court has ruled already, but we take 14 exception to that one. 15 The damages instruction, there's indication here about loss 16 or diminished assets or property in the value of money. I don't 17 think we've heard any testimony about the value of money. I don't think that that's been establish by the evidence in this 18 19 case, so I don't think that that is an appropriate instruction. 20 As to the Insurance Fair Conduct Act, the bad faith, and 21 the --22 THE COURT: Slow down, Mr. Harris. Let's make a 23 record here. 24 What you're talking to me about Instruction No. 30? 25 MR. HARRIS: Correct.

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THE COURT: And we're talking about is the paragraph
 1
2
     that concerns the Consumer Protection Act, or --
 3
               MR. HARRIS: No, Your Honor --
4
               THE COURT:
                           -- oh, I'm sorry. The Insurance Fair
 5
    Conduct Act.
 6
               MR. HARRIS: Yes.
                                  This is on page 2 of Instruction 30.
 7
     There's an instruction regarding loss or diminished assets or
8
     property and the value of money. I don't think we've received
9
     testimony about how the jury is going to calculate that, about
10
    whether he's lost the value of money. So I don't think there's
11
     been testimony to support those instructions in this case.
12
               THE COURT: Mr. Wampold, we haven't had any
13
     discounting-to-present-value testimony.
14
               MR. WAMPOLD:
                             No.
                                  It's just the loss of money; I
15
     mean, the fact that he didn't have that money. The $16,000 on
16
     Strzelec is clear, and the $931 he had to pay out of pocket
17
     because he didn't have the money.
                           But the jury doesn't have any instruction
18
               THE COURT:
19
     as to the value of money.
                                In other words, is the money the same
20
     in 2016 as it is in 2020.
21
               MR. WAMPOLD: Yeah, I guess I don't think, in light of
22
     what we're talking about, that that's a necessary instruction.
23
               THE COURT:
                           Okay. Mr. Harris, I'll take that out. I
24
     think you 're correct that there's no -- we don't have any
25
     testimony about it. It would be sheer guesswork as to the value
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of money, if it's changed over that period of time. 1 2 So, Ms. Pernell, before this goes out, we will exclude that 3 phrase, "including the value of money," on Instruction 30. That would be for all three of the tort 4 MR. HARRIS: 5 claims, Your Honor, the IFCA, the bad faith, and the negligence. THE COURT: Yes, for all three. 6 7 MR. HARRIS: All right. And then in terms of 8 instructions that were not given, I'm just going to repeat our 9 discussion from yesterday in terms of the proposed instructions 10 we provided regarding duplication. 11 We submitted a separate instruction. We thought that would 12 be appropriate to have a separate instruction rather than where 13 it's indicated in the damage instruction. Here at the end, the 14 very, very last sentence of Instruction No. 30 does talk about 15 it, but I think it should be set out and made more clear to the 16 I don't think the jury instructions, as they're worded, 17 clearly indicates that they cannot duplicate damages for multiple claims. 18 19 THE COURT: It is contained in Instruction 30, and it 20 is also an explicit instruction in the verdict form as well. 21 you think it should be there a third time? 22 MR. HARRIS: We think it should be set out and set out 23 separately so that it's made clear to the jury. 24 THE COURT: Well, Mr. Harris, I think it would pass 25 muster if we had one continuous instruction rather than several

small ones, so I think that's a distinction without a 1 2 difference. 3 MR. HARRIS: Okay. 4 And the last instruction that was not given that we talked 5 about previously is the one about the redactions, Your Honor. 6 understand the court's position on that, but I wanted to note 7 that exception for the record. Okay. All right. Anything further, 8 THE COURT: 9 Mr. Harris? 10 MR. HARRIS: No, Your Honor. 11 THE COURT: Okay. Well, then, Ms. Pernell, did you 12 put on your speaker so you can speak to me? 13 THE LAW CLERK: Yes, I did. Can you hear me? 14 THE COURT: Yes, I can. 15 I want you to make those changes to Instruction 30, taking 16 out those phrases. And then let's push these out to our jurors, 17 so that they have a copy, in an email. When you push it out to them, you should indicate to them that they should delete the 18 19 preliminary instructions, and it is the court's final 20 instructions to the jury that will govern. 21 THE LAW CLERK: Okav. 22 THE COURT: Okay. Mr. Wampold, are you all set up? 23 Are you going to be using bullet points and that sort of thing? 24 MR. WAMPOLD: Yeah, I'll be using PowerPoint. And I'm 25 just -- I will be all set up. We're making a couple last-minute

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1
     changes, based on the court's ruling on those damages slides, so
2
    we just have to make a few changes, and then I'll be ready.
 3
               THE COURT:
                           Mr. Harris, you're ready to go as well?
4
               MR. HARRIS: Yes, Your Honor, we're ready to go.
 5
                           Mr. Wampold, if you're going to go for 75
               THE COURT:
6
    minutes, I'm going to let them have a break after about a half
 7
     an hour.
8
               MR. WAMPOLD:
                             Okay.
9
               THE COURT: So I'll let you either decide when to do
10
     that, when you come to a break, or if you keep going past 30
    minutes, I will find a break for you.
11
12
                                    Sounds good.
               MR. WAMPOLD:
                             Okay.
13
          So what time, approximately, do you want to take the break,
14
     do you think?
15
               THE COURT:
                           Well, depending on how long it takes me to
     read the instructions. I'd kind of like to take a 15-minute
16
17
     break in between your argument and Mr. Harris's.
                             I thought you wanted a break?
18
               MR. WAMPOLD:
19
               THE COURT:
                           Just a stand-up break. You can work that
20
     into your presentation.
21
          Same for you, Mr. Harris. We can't go for an hour just
22
    with the talking heads.
23
               MR. WAMPOLD:
                             Right.
24
               THE COURT: I know you're both more interesting than
     that, but you want them to stay awake.
25
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MR. WAMPOLD: Yeah, I understand. Thank you.
 1
2
              THE COURT: All right. Then we have about 20 minutes
 3
     before we -- unless we have our jurors already reporting in.
 4
    Mr. Cogswell?
 5
              THE CLERK: We do not, Your Honor.
6
              THE COURT:
                           Okay. Then I'm going to blank myself out
7
     and do some other things. You can as well, and we'll be back,
8
     ready to go, promptly at nine o'clock.
9
              MR. WAMPOLD: Sounds good, Your Honor. Thank you.
10
              THE COURT: Okay.
11
                 (Court in recess 8:41 a.m. to 9:03 a.m.)
12
              THE COURT: Mr. Harris, you didn't get a chance to
13
     rest in front of the jury yesterday, so after I greet them, I'll
14
     give you the chance to do that. I'll then ask Mr. Wampold if
15
     there's any rebuttal; he'll say "no," and then we can go right
16
     into jury instructions.
17
          Let's bring them in.
                   THE FOLLOWING PROCEEDINGS WERE HELD
18
                        IN THE PRESENCE OF THE JURY:
19
20
              THE COURT: Good morning. Would you all unmute for
    me, please? Okay. Everybody is ready to go to work this
21
22
    morning?
23
               JUROR: Yes.
24
              THE COURT: Okay. One of the first things that's
25
     going to happen this morning is, I want you to delete the
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previous jury instructions I gave you, and you should have all received a copy of the jury instructions, but first we have some formal proceedings to take care of in front of you.

So I'm going to turn to Mr. Harris. If I can have you all mute again.

Mr. Harris, does the defense have any further witnesses?

MR. HARRIS: No. Your Honor. The defense rests.

THE COURT: Mr. Wampold, the defense rests. Is there any rebuttal?

MR. WAMPOLD: There is no rebuttal, Your Honor.

THE COURT: Okay.

Ladies and gentlemen, I'm going to ask for your kind attention as I read to you the court's final instructions. You can follow along with me, because they're going to be up on the screen, and it's entirely up to you as to how you learn best. If you learn by listening, it's fine for you to just listen. If you learn by reading along, then please follow along with me.

These are the court's instructions to the jury.

COURT'S INSTRUCTIONS

THE COURT: Members of the jury, now that you've heard all the evidence, it is my duty to instruct you on the law that applies to this case. It is this final set of instructions that controls your consideration. It is your duty to weigh and to evaluate all the evidence received in the case, and in that process, to decide the facts. It is also your duty to apply the

law, as I give it to you, to the facts as you find them. Whether you agree with the law or not, you must decide the case solely on the evidence and the law and must not be influenced by any personal likes or dislikes, opinions, prejudices, or sympathy. You'll recall that you took an oath promising to do so at the beginning of the case.

You must follow all of these instructions and not single out some and ignore others. They are all important. You must not make any assumptions based upon any changes from the preliminary set of instructions. It is the final set that you are governed by. Please do not read into these instructions, or anything I may have said or done, any suggestion as to what verdict you should return. That is a matter entirely up to you.

Number 2: To help you follow the evidence, I will give you a brief summary of the positions of the parties. This is a civil case brought against defendant Integon General Insurance Company. The plaintiff is Daniel Hopkins. On April 23rd, 2016, plaintiff Daniel Hopkins and his wife Irene were stopped behind a pedestrian crosswalk on Northwest 85th Street in Seattle, Washington, when they were hit from behind by another driver.

The driver who caused the crash was underinsured at the time of the collision. Plaintiff Hopkins is an insured under the underinsured motorist UIM policy with the defendant Integon Insurance Corporation.

Because the driver who caused the crash was underinsured,

plaintiff Hopkins has a claim for the insurance benefits against defendant Integon, his insurer for this claim.

Plaintiff Hopkins makes the following five claims against the defendant, Integon: One, for insurance benefits; two, for violation of the Consumer Protection Act; three, for violation of the Insurance Fair Conduct Act; four, for violation of the insurance duty of good faith; and five, for negligently handling Mr. Hopkins' UIM claim.

Plaintiff Daniel Hopkins claims that as a result of defendant Integon General Insurance Corporation's conduct, he suffered damages. You'll be asked to determine the value of each of these claims.

Defendant Integon General Insurance Corporation disputes the amounts of benefits requested, and denies each and every one of plaintiff Hopkins' claim.

Instruction 3: During deliberations, you will have to make your decision based on what you recall of the evidence. You will not have a transcript of the trial. I urge you to pay close attention to the testimony as it is given. If at any time you cannot hear or see the testimony, evidence, questions, or arguments, let me know so that I can correct the problem.

Number 4: Those exhibits received in evidence that are capable of being displayed electronically by using the Box platform will be provided to you in that form, and you'll be able to view them in the jury room. The court technician will

show you how to use the Box platform and how to locate and view exhibits on your device. If you have any questions about how to operate the Box platform, you may send a note through the chat function of ZoomGov to the courtroom deputy. Do not refer to or discuss any exhibit you were attempting to view.

If a technical problem or question requires hands-on maintenance or instruction, the court technician may enter the jury room, with the courtroom deputy present for the sole purpose of assuring that the only matter that is discussed is a technical problem. When a court technician or any non-juror is in the jury room, the jury shall not deliberate. No juror may say anything to the court technician or any non-juror, other than to describe the technical problem or seek information about the operation of the equipment. Do not discuss any exhibit or any aspect of the case.

The sole purpose of providing the Box platform in the jury room is to enable jurors to view the exhibits received in evidence in this case. You may not use the platform or your devices for any other purpose; for example, any website, database, directory, dictionary, or game.

If you discover that the computer provides or allows access to such materials, you must inform the court immediately, and refrain from viewing such materials. Do not remove the computer or any electronic data from the jury room, and do not copy any such data.

Number 5: You had permission to take notes to help you remember the evidence. If you took notes, please keep them to yourself until you and your fellow jurors go to the jury room to decide the case. When you leave, you should destroy your notes. Whether or not you took notes, you should rely on your own memory of the evidence. Notes are only to assist your memory. You should not be overly influenced by your notes or those of your fellow jurors.

Number 6: There are rules of evidence that control what can be received into evidence. During the trial, when a lawyer asked a question or offered an exhibit into evidence, and a lawyer on the other side thought it was not permitted by the rules of evidence, that lawyer was allowed to object. If I overruled the objection, the question could have properly been answered and the exhibit received. If I sustained the objection, the question could not have been properly answered, and the exhibit was not received.

Whenever I sustained an objection to a question, you must ignore that question and must not guess what the answer might have been or consider any answer that was given.

During the trial, I may have ordered that evidence be stricken from the record, and that you disregard or ignore the evidence. When you are deciding the case, you must not consider the evidence that I told you to disregard.

Number 7: The evidence you are to consider in deciding

what the facts are consists of, one, the sworn testimony of any witness; two, the exhibits which are received into evidence; three, any facts to which the lawyers have agreed; and four, any facts that I instructed you to accept as proved.

You may also hear testimony in the form of depositions.

This testimony is also evidence from which you are to decide the facts. You should draw no inferences from whether these individuals were or were not physically present in the court themselves.

Number 8: In reaching your verdict, you may consider only the testimony and exhibits received into evidence. Certain things are not evidence, and you may not consider them in deciding what the facts are. I'll list them for you.

One, arguments and statements by lawyers are not evidence. The lawyers are not witnesses. What they say in their opening statements, closing arguments, and at other times is intended to help you interpret the evidence, but it is not evidence. If the facts as you remember them differ from the way the lawyers have stated them, your memory of them controls.

Two, questions and objections by lawyers are not evidence.

Attorneys have a duty to their clients to object when they
believe a question is improper under the rules of evidence. You
should not be influenced by the objection or by the court's
ruling on it.

Three, testimony that has been excluded or stricken or that

you have been instructed to disregard is not evidence and must not be considered.

Four, anything you may have seen or heard when the court was not in session is not evidence. You are to decide the case solely on the evidence received at the trial. In addition, some evidence is received only for a limited purpose. When I instructed you to consider certain evidence only for a limited purpose, you must do so, and you may not consider that evidence for any other purpose.

Instruction No. 9: Evidence may be direct or circumstantial. Direct evidence is direct proof of a fact, such as testimony by a witness about what that witness personally saw or heard or did.

Circumstantial evidence is proof of one or more facts from which you can find another fact. You should consider both kinds of evidence.

The law makes no distinction between the weight to be given to either direct or circumstantial evidence. It is for you to decide how much weight to give to any evidence.

Number 10: In deciding the facts of this case, you may have to decide which testimony to believe, and which testimony not to believe. You may believe everything a witness says, or part of it, or none of it.

In considering the testimony of any witness, you may take into account, one, the opportunity and ability for the witness

to see and know and hear the things testified to; two, the witness's memory; three, the witness's manner while testifying; four, the witness's interest in the outcome of the case, if any; five, the witness's bias or prejudice, if any; six, whether other evidence contradicted the witness's testimony; seven, the reasonableness of the witness's testimony in light of all the evidence; and eight, any other factors that bear on believability.

Sometimes a witness may say something that is not consistent with something else he or she said. Sometimes different witnesses will give different versions of what happened. People often forget things or make mistakes in what they remember. Also, two people may see the same event but remember it differently. You may consider these differences, but do not decide the testimony is untrue just because it differs from other testimony.

However, if you decide that a witness has deliberately testified untruthfully about something important, you may choose not to believe anything that witness said; on the other hand, if you think the witness testified untruthfully about some things but told the truth about others, you may accept the part you think is true, and ignore the rest.

The weight of the evidence as to a fact does not necessarily depend on the number of witnesses who testify. What is important is how believable the witnesses were and how much

weight you think their testimony deserves.

Eleven, you've heard testimony from experts who testified to opinions and the reasons for their opinions. This opinion testimony was allowed because of the education or experience of the witness. Such opinion testimony should be judged like any other testimony. You may accept it or reject it, and give it as much weight as you think it deserves, considering the witness's education, experience, their reasons given for the opinion, and all the other evidence in the case.

Instruction 12: All parties are equal before the law, and a corporation is entitled to the same fair and conscientious consideration by you as any party.

Number 13: Defendant Integon General Insurance Corporation is a corporation. A corporation can act only through its officers and employees. Any act or omission of an officer or employee is the act or omission of the corporation. A corporation is charged with the knowledge of its officers, agents, and employees.

Instruction No. 14: In this case, the plaintiff was required to prove each of the claims by a preponderance of the evidence. When a party has the burden of proof on any claim by a preponderance of the evidence, it means that you must be persuaded by the evidence that the claim is more probably true than not true. You should base your decision on all the evidence, regardless of which party presented it.

Instruction 15: The term "proximate cause" means a cause which in a direct sequence produces the injury complained of and without which such injury would not have happened. There may be more than one proximate cause of an injury.

Instruction 16: An underinsured motorist UIM policy provides coverage to its insured for injuries or damages caused by an at-fault, underinsured motorist. The purpose of UIM insurance is to allow an injured party to recover those damages that the injured party would have received had the at-fault party been insured with liability limits as broad as the injured party's own UIM insurance limits.

Instruction 17: Benefits claim. The Integon General Insurance Corporation policy provides UIM coverage for any injury and damages which was proximately caused by the April 23rd, 2016, collision. The plaintiff has the burden of proving what injuries and damages to the plaintiff were proximately caused by this and what amount the plaintiff should be recovered.

Number 18: Consumer Protection Act claim. Plaintiff
Hopkins claims that defendant Integon General Insurance
Corporation violated the Washington Consumer Protection Act. To
prove this claim, plaintiff Hopkins has the burden of proving
each of the following propositions:

One, that defendant Integon General Insurance Corporation engaged in an unfair or deceptive act or practice; two, that the

act or practice occurred in the conduct with defendant Integon General Insurance Corporation's trade or commerce; three, that the act or practice affects the public interest; four, that plaintiff Hopkins was injured in either his business or his property; and five, that defendant Integon General Insurance Corporation's act or practice was a proximate cause of plaintiff Hopkins' injury.

If you find from your consideration of all the evidence that each of these propositions has been proved, your verdict should be for plaintiff Hopkins on this claim. On the other hand, if any of these propositions has not been proved, your verdict should be for defendant Integon General Insurance Company on this claim.

Instruction 19: A violation, if any, of one or more of the following statutory or regulatory requirements is a failure to provide benefits, an unfair or deceptive act or practice under the rules of insurance under the Consumer Protection Act and a breach of the duty of good faith;

One, failing to acknowledge and act reasonably promptly upon communications with respect to claims arising under insurance policies; two, failing to adopt and implement reasonable standards for the prompt investigation of claims arising under an insurance policy; three, refusing to pay claims without conducting a reasonable investigation; four, not attempting in good faith to effect prompt, fair, and equitable

settlement of claims in which liability has become reasonably clear; five, failing to promptly provide a reasonable explanation of the basis in the insurance policy in relation to the facts or applicable law for denial of a claim; six, compelling an insured to initiate or submit to litigation, arbitration, or appraisal to recover amounts due under an insurance policy by offering substantially less than the amounts ultimately recovered in such actions or proceedings.

Number 20: A single violation of a statute or regulation related to the business of insurance is an unfair or deceptive act or practice. A violation of these statutes and administrative rules also affects the public interest.

Statutory and administrative rules that govern insurance companies are set forth in jury instructions above.

If you find that a violation of a statute or regulation relating to the business of insurance has occurred, then you must find that the first three elements of Consumer Protection Act violation have been proved.

Number 21: An insured has suffered a, quote, injury, under the Consumer Protection Act if their property or business has been injured to any degree.

The injury element is met if the insured's property, interest, or money is diminished because of the unlawful conduct, even if the expenses caused by the statutory regulatory violation is minimal.

Number 22: Insurance Fair Conduct Act claim. Plaintiff
Hopkins claims that defendant Integon General Insurance
Corporation has violated the Washington Insurance Fair Conduct
Act. To prove this claim, the plaintiff has the burden of
proving each of the following propositions:

One, that defendant Integon General Insurance Corporation unreasonably denied payment of benefits; two, that plaintiff Hopkins was damaged; three, that defendant Integon General Insurance Corporation's act or practice was a proximate cause of damage.

If you find from your consideration of all the evidence that each of those propositions has been proved, your verdict should be for the plaintiff Hopkins on this claim. On the other hand, if any of these propositions has not been proved, your verdict should be for defendant Integon General Insurance Corporation on this claim.

Number 23: Failure to act in good faith claim. An insurer has a duty to act in good faith. This duty requires an insurer to deal fairly with its insured. The insurer must give equal

consideration to its insured's interest and its own interests, and must not engage in any action that demonstrates a greater concern for its own financial interest than its insured's financial risk. An insurer who does not deal fairly with its insured or who does not give equal consideration to its insured's interests fails to act in good faith.

In proving that an insurer failed to act in good faith, an insured must prove that the insurer conduct was unreasonable, frivolous, or unfounded. The insured is not required to prove the insurer acted dishonestly or that the insurer intended to act in bad faith.

Instruction No. 24: The duty of good faith requires an insurer to conduct a reasonable investigation before refusing to pay a claim submitted by its insured. An insurer must also have a reasonable justification before refusing to pay a claim. An insurer who refuses to pay a claim without conducting a reasonable investigation or without having a reasonable justification fails to act in good faith.

Number 25: The reasonableness of the defendant's claim handling must be measured as of the time that the conduct occurred, and based on the facts known to it at the time.

Number 26: The negligence claim. The plaintiff has the burden of proving each of the following propositions on the claim of negligence:

First, that Integon General Insurance Corporation acted or

failed to act in one of the ways claimed by the plaintiff, and that in so acting or failing to act, Integon General Insurance Corporation was negligent; second, that the plaintiff was harmed; third, that the negligence of Integon General Insurance Corporation was a proximate cause of damage to the plaintiff.

If you find from your consideration of all the evidence that each of these propositions has been proved, your verdict should be for the plaintiff on this claim. On the other hand, if any of these propositions has not been proved, your verdict should be for Integon General Insurance Corporation on this claim.

Instruction 27: Negligence is the failure to exercise ordinary care. It is the doing of some act that a reasonably careful person would not do under the same or similar circumstances, or the failure to do some act that a reasonably careful person would have done under the same or similar circumstances.

Ordinary care means the care that a reasonably careful person would exercise under the same or similar circumstances.

Instruction No. 28: An insurance regulation provides that the following is applicable to all insurers:

One, every insurer shall complete investigation of a claim within 30 days after the notification of the claim, unless such investigation cannot reasonably be completed within such time;

Two, if the insurer needs more time to determine whether a

claim should be accepted or denied, it shall so notify the claimant within 15 days, giving the reasons more time is needed. If the investigation remains incomplete, the insurer shall, within 45 days from the date of the initial notification, and no later than every 30 days thereafter, send to such claimant a letter setting forth the reasons that additional time is need for investigation.

Three, for all other pertinent communications from a claimant reasonably suggesting that a response is expected, an appropriate reply must be provided within 10 working days for individual insurance policies, or 15 working days with respect to communications arising under group insurance contracts.

Four, the insurer's claims files are subject to examination by the commissioner or by a duly appointed designee. The files must contain all notes and work papers pertaining to the claim in enough detail that pertinent events and dates of the events can be reconstructed.

Number 29: The violation, if any, of a statute or administrative rule is not necessarily negligence, but it may be considered by you as evidence in determining negligence.

Statutory and administrative rules that govern insurance companies are set forth in Instruction No. 19 and 28 above.

Instruction No. 30: Damages, benefits claim. It is your duty to determine the value of plaintiff Hopkins' claim for insurance benefits, which is the amount of money that will

reasonably and fairly compensate plaintiff Hopkins for such damages as you find were proximately caused by the negligence of the at-fault driver in the April 23rd, 2016, collision.

In determining the value of that claim, you shall not consider the limits of plaintiff Hopkins' UIM policy. You should consider the following past economic damage elements:

The reasonable value of necessary medical care, treatment, and services received at the present time. Plaintiff Hopkins and defendant Integon General Insurance Company agreed that this amount totals \$10,931.

In addition, you should consider the following noneconomic damage elements: The nature and extent of the injuries; the disability, disfigurement, and loss of enjoyment of life -- excuse me. I think we have someone's mike -- could that individual please mute?

Let me back up.

In addition, you should consider the following noneconomic damage elements: The nature and extent of the injuries; the disability, disfigurement, and loss of enjoyment of life experienced and, with reasonable probability, to be experienced in the future; the pain and suffering, both mental and physical, and inconvenience experienced and, with reasonable probability, to be experienced in the future.

Plaintiff has been paid \$10,000 in personal injury protection and \$25,000 from Progressive Insurance Company for

Ms. Montes causing the collision. You are not to consider the fact that plaintiff Hopkins has already received these payments in calculating your damages.

The question of who pays or whom reimburses whom will be decided by the court in another proceeding after you return your verdict.

It is the duty of the court to instruct you as to the measure of damages. That is the amount of money that will reasonably and fairly compensate plaintiff Hopkins on plaintiff Hopkins' claim that Integon General Insurance Corporation violated the Consumer Protection Act, the Insurance Fair Conduct Act, failed to act in good faith, and for negligence, and by instructing you as to the measure of damages of those claims, the court does not mean to suggest for which party your verdict should be rendered as to those claims.

Consumer Protection Act: If you find for plaintiff Hopkins on his claim that defendant Integon General Insurance Corporation violated the Washington Consumer Protection Act, then the damages that you may award for this claim are limited to plaintiff Hopkins' unreimbursed medical expenses and the expert witness fee that plaintiff Hopkins paid for this case. Plaintiff Hopkins' unreimbursed medical expenses totaled \$935 and the expert witness fees he paid totaled \$16,000.

Insurance Fair Conduct Act: If you find for plaintiff
Hopkins on this claim that defendant Integon General Insurance

Corporation violated the Washington Insurance Fair Conduct Act, then you should consider the following damages:

Any emotional distress that plaintiff Hopkins suffered as a proximate result of the defendant Integon General Insurance Corporation's violation of the Insurance Fair Conduct Act; loss or diminished assets or property.

Failure to act in good faith, if you find for plaintiff Hopkins on his claim that defendant Integon General Insurance Company failed to act in good faith, then you should consider the following elements of damage:

Any emotional distress that Plaintiff Hopkins suffered as a proximate result of defendant Integon General Insurance

Company's failure to act in good faith; loss or diminished assets or property.

Negligence: If you find for plaintiff Hopkins on his claim that defendant Integon General Insurance Company was negligent, then you should consider the following elements of damages:

Any emotional distress that plaintiff Hopkins suffered as a proximate result of Integon General Insurance Corporation's negligence; loss or diminished assets or property.

The burden of proving damages rests upon plaintiff Hopkins, and it is for you to determine, based upon evidence, whether any particular element has been proved by a preponderance of evidence.

Your award must be based on evidence, and not upon

speculation, guess, or conjecture.

The law has not furnished us with any fixed standards by which to measure noneconomic damages. With respect to these matters, you must be governed by your own judgment, by the evidence in the case, and by these instructions.

When determining the damages for each or any individual claim that has been proven by plaintiff Hopkins, you should determine what damages were proven, by a preponderance of the evidence, for that individual claim, regardless of any amount determined or awarded for any other claim. In other words, you should determine the amount of damage for any individual claim as if it were the only claim that was asserted or proven.

If you determine that more than one claim has been proven and award damages for more than one claim, then the total award is reflected, and the verdict form should not duplicate the damages. In other words, if you conclude that plaintiff Hopkins suffered the same economic or noneconomic damages as a result of more than one of the causes of action that was proven, then the total award should only reflect those damages one time. Thus, the total award recorded in the verdict form should reflect total damages suffered by plaintiff Hopkins, not a duplicate of the same damages.

Instruction 31: An insured has a duty of good faith to the insurer. Plaintiff Hopkins complied with his duty.

Instruction No. 32: If your verdict is for the plaintiff,

and if you find that, one, before this occurrence, the plaintiff had a condition that was not causing pain or disability, and, two, the condition made the plaintiff more susceptible to injury than a person in normal health, then you should consider all of the injuries and damages that were proximately caused by the occurrence, even though those injuries due to the pre-existing condition may have been greater than those that would have been incurred under the same circumstances by a person without that condition.

No. 33: A verdict form has been prepared for you to fill out electronically. After you have reached unanimous agreement on a verdict, your presiding juror will fill in the form that has been given to you, sign and date it, and advise the courtroom deputy that you are ready to return to the courtroom.

Instruction No. 34: I'll now say a few words about your conduct as jurors.

First, keep an open mind, and do not decide what the verdict should be until you and your fellow jurors have completed your deliberations.

Second, because you must decide this case based only on the evidence received in the case and on my instructions as to the law that applies, you must not be exposed to any other information about the case or to the issues it involves during the course of your jury duty. Thus, until the end of the case or unless I tell you otherwise, do not communicate with anyone

in any way, and do not let anyone else communicate with you in any way about the merits of the case or anything to do with it. This includes discussing the case in person, in writing, by phone or electronic means, via email, text messaging, or any Internet chat room, blog, website, or other feature.

This applies to communicating with your fellow jurors until I give you the case for deliberation and applies to communicating with everyone else, including your family members, your employer, and the people involved in the trial. Although you may notify your family and your employer that you've been seated as a juror in the case, but if you are asked, in any way, about your jury service or anything about this case, you must respond that you've been ordered not to discuss the matter and to report the contact to the court.

Because you've received all the evidence and legal instruction you properly may consider to return a verdict, do not read, watch, or listen to any news or media accounts or commentary about the case or anything to do with it.

Do not do any research, such as consulting dictionaries, searching the Internet, or using other reference materials, and do not make any investigation or in any other way try to learn about the case on your own.

The law requires these restrictions to ensure that the parties have a fair trial based upon the same evidence that each party has had an opportunity to address.

A juror who violates these restrictions jeopardizes the fairness of these proceedings, and a mistrial could result that would require the entire trial process to start over. If any juror is exposed to any outside information, please notify the court immediately.

Instruction No. 35: Before you begin your deliberations, elect one member of the jury as your presiding juror. The presiding juror will preside over the deliberations and serve as the spokesperson for the jury in court.

You should diligently strive to reach agreement with all of the other jurors, if you can do so. Your verdict must be unanimous. Each of you must decide the case for yourself, but you should do so only after you've considered all the evidence, discussed it fully with the other jurors, and listened to their views. It's important that you attempt to reach a unanimous verdict, but, of course, only if each of you can do so after having made your own conscientious decision.

Do not be unwilling to change your opinion if the discussion persuades you that you should, but do not come to a decision simply because other jurors think it is right, or change an honest belief about the weight and effect of the evidence simply to reach a verdict.

Ladies and gentlemen, that concludes the reading of the court's instructions. You should have also received a verdict form. As I indicated to you previously, a verdict form will go

with you to the jury room, and it will be able to be filled out 1 2 by the jury foreperson. 3 I ask now that you give your kind attention to Mr. Wampold. 4 He has the privilege of giving the closing arguments for 5 Mr. Hopkins. 6 Mr. Wampold? 7 MR. WAMPOLD: Thank you, Your Honor. Good morning, members of the jury. Again, it may be useful 8 9 to put this in speaker mode, and then move the screen around, 10 because I'm going to have the screen on the entire time, so do 11 whatever you wish, but that may be useful. 12 And with your permission, Judge Pechman, I'll begin? 13 THE COURT: Yes, please do so. PLAINTIFF'S CLOSING ARGUMENT 14 15 MR. WAMPOLD: May it please the court, counsel, 16 members of the jury. 17 You're here to decide -- for two reasons, really -- to decide the proper value of Mr. Hopkins' damages caused by the 18 19 April 23rd, 2016, collision, and to enforce the insurance laws 20 that are designed to ensure that insurance companies treat their 21 policyholders fairly, and that they do not act against the law 22 and the public interest. 23 Now, I want to begin by talk about your role as a jury.

During this trial, you've seen that we've given Judge

But one

Pechman a lot of respect, and that respect is deserved.

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of the things that's been lost that we would have had if we'd been in court -- and this is, from my understanding, only the second time in the history of the United States that we've had a Zoom trial, and we're all learning. But one of the things that's been lost is, had we all been in person, every time you came into the courtroom, we would stand for you, and every time you left the courtroom, we would stand for you. And that honor has been lost, but it's too bad, because we do -- you are very important to this process, and the reason that we stand when we're in person is because, in reality, you are the most important people in this courtroom, and that's because of your role in this case.

Our role is to advocate for Mr. Hopkins. Defense counsel, Mr. Harris and Ms. Lee, their role is to advocate for the insurance company. Judge Pechman's role is to decide what evidence comes before you and to tell you what the law is. But you have the most important role. You will be the ones that will decide what justice is in this case. And this case is important, and your decision will be on record for everyone to see. Jury trials are public, and verdicts stand on record in the courthouse for the world to see your work.

Now, Judge Pechman said this yesterday, and it's true. Our legal system in our country is a beacon of justice around the country (sic). Our system gives great power to the people, to citizens.

The way our system works is that the legislature writes the laws, but juries like you enforce them. And unlike the legislative branch, no one can influence you. They can't offer you money or a job when they're done. They can't pay you. It's just citizens coming together from a cross section of our community to decide cases in an unbiased way, and this is an integral part of our democracy.

Now, this is an insurance case. You all know that. You've heard that word "insurance" more times than you probably want to in the last week or so. But insurance cases are important, and the reason insurance is important is because insurance is meant to protect people when they need it most. We all hope to never need insurance, but we pay premiums every month so that we have that protection when tragedy strikes. It is the umbrella meant to protect us on a rainy day, and we pay good money, every month, for the promise of that protection.

But as you heard in this trial, insurance is a strange product. Every month you make a payment. Think about the other products you pay for every month. Electricity, cable, garbage, water. In exchange for all of those payments, you get something tangible. With insurance, you don't get anything tangible; no electricity, no cable, no garbage. What you get is a promise. That's all you get, a promise, a promise that an insurance company will pay you when you need it.

But how does one make insurance companies live up to that

promise? Obviously, the better business model for the insurance company is just to accept your premium every month, and then when it's time to fulfill the promise, say, "No, thank you." What is it that stops insurance companies from saying, "Yes, your injuries are quite significant, but we do not want to cover it because it's not in our financial interest. We'd rather keep your premiums and the money we owe you. We make more money that way." What happens if they do that?

Well, if the insurance company does that, it's too late to switch insurance companies. Once the tragedy strikes and you need the coverage, it's too late to switch horses. So what can be done to stop insurance companies, like Integon, from breaking their promise? What is stopping Integon from acting in its own financial interest? What is it that forces insurance companies to act reasonably and fairly? The answer is you; you, the jury.

We know that insurance companies are financially incentivized to stiff people, like Integon has tried to do to Mr. Hopkins in this case. That is why we have laws meant to stop this behavior.

But even though these laws are on the books, insurance companies still have the arrogance to act like they're above the law; disagreeing with doctors without any foundation; doing no investigation; concluding early on, "Yeah, if you want the limits, you'll have to sue us." That is what you do when you're so big and important that you believe you can ignore the law.

You are above the law. And that is why juries like you are so important.

Integon probably assumed at some point that Mr. Hopkins would just give up. That's why they offered so little, \$17,000 and then \$40,000. They figured at some point Mr. Hopkins would cave and take the little amount they offered, even though it wasn't fair. But guess what? Here we are. Here we are, in the middle of a pandemic, and we've made it all through a trial. Thanks to Judge Pechman and the courts, the justice system is open for business. And you, now, can stop -- you are the only ones that can stop Integon from this bully behavior of refusing to do what the law and the policy require them to do.

Now, when you go back to the jury room, when we're all done with closing arguments here, you're going to have two jobs.

One, you're going to have decide what your answers are to each of the questions that Judge Pechman has asked you in the verdict form.

Your Honor, do the jurors have the verdict form?

THE COURT: Yes, they do, Mr. Wampold.

MR. WAMPOLD: Okay. Thank you.

THE CLERK: Your Honor, I need to email that out to them.

THE COURT: Oh. It's coming.

MR. WAMPOLD: Well, I'll give you a little preview of it, and because this is what you're really going to do. Judge

Pechman, in the verdict form, has asked you questions, and, one, you're going to have to decide what the answers are to each of the questions Judge Pechman has asked. And then you're going to have to explain to your fellow jurors why you've answered those questions the way you have, and I plan to use my time this morning to help you answer those questions.

The first question is for you to value Mr. Hopkins' claim.

Now, importantly, if you look at Instruction No. 30 -- we just read it -- Judge Pechman tells you to not consider the \$250,000 limit or the money that Mr. Hopkins has already received, the \$25,000 from Ms. Montes and the \$10,000 for medical bills.

What Judge Pechman has explained is the question of who pays or who reimburses who will be decided by Judge Pechman in another proceeding. So as Judge Pechman has said several times, you have to trust her. You have to follow her instructions and trust that she knows what she's doing. So what you-all are going to do is the exercise that Integon never performed but that Mr. Hopkins had paid them to do, which is to evaluate, overall, what his claim was worth. That is what you're going to do.

Now, the first item in Instruction No. 30 is the economic damages that the parties agree are \$10,931. That amount should be included in this figure. But also included on this line should be the noneconomic damages. And this is where it gets

more interesting, because, as Judge Pechman instructed you, there is no fixed formula for how you come up with this amount. You-all will have to work together as a community to decide what is justice, based on the evidence.

But Judge Pechman, in her wisdom, doesn't leave you at sea without a compass. She gives you some guidance on how to arrive at the right number.

For starters, we need to look at what the measuring stick is for proving damages. This is from Jury Instruction No. 30, and it says, "The burden of proving damages rests upon the plaintiff. It is for you to determine, based upon the evidence, whether any particular element has been proved by a preponderance of the evidence."

Now, this is very important. This is not a criminal trial. In a criminal trial, where someone could go to jail, the burden is beyond a reasonable doubt. So if we have scales, it's beyond a reasonable doubt. It's a very, very high burden. And that burden can be frustrating for jurors who are bound by this standard of measuring justice.

In a criminal setting, when the burden is very high, almost black-and-white certainty, it can be frustrating for jurors who say, "You know, I think this person did X, Y, or Z, but I just can't say beyond a reasonable doubt," and so the doubt allows an out. A defense can hire an expert, muddy the waters, throw up different things to see what sticks, and jurors feel frustrated

that the doubt creates an out.

In a civil trial, it's a different standard, and let me read this to you. This is Instruction No. 14.

"In this case, the plaintiff is required to prove each of his claims by a preponderance of the evidence. When a party has the burden of proof on any claim by a preponderance of the evidence, it means you must be persuaded by the evidence that the claim is more probably true than not true."

So beyond a reasonable doubt is like this, and more probably true than not true is like this, 51 percent.

And this, in a civil trial, where no one is going to jail, the jury is allowed to apply this much more manageable standard. Preponderance is an approach in which jurors get to weigh conflicting evidence and decide which is probably true and not true.

Casting doubt does not create an out in civil cases.

Reason and common sense carry the day, rather than how much confusion and doubt the other side can stir up.

So when you're calculating damages in the back, there may be someone that says, "You know, I'm just not sure, I have doubts," remind them of the law. The law is preponderance. You can have doubts. You can have reasonable doubts. It's just what is more reasonably true than not true.

So let's look at the other guidance that Judge Pechman provides you to value Mr. Hopkins' claim.

In Instruction 30, she said, "It is your duty to determine the value of plaintiff Hopkins' claim for insurance benefits, which is the amount of money that will reasonably and fairly compensate plaintiff Hopkins for such damages."

And I want to talk about a couple of words here.

Reasonable, and that means in accordance within reason or sound thinking, within the bounds of common sense. And I'm going to give you reasons for each element of damages that I'm going to ask for.

Fair, you all know what fair means: Impartial, in accordance with the evidence, law, rules, logic, unbiased, unprejudiced. Put aside your preconceived notions. That's fair.

Now, compensate. This is an interesting word. It's, actually, an old English world that means balance the scales. You've all seen the scales of justice, you've seen that, and that is what compensate refers to. And the reason is is that when there's been an injury like this, and somebody's life has been forever altered, the scales of justice are out of alignment, and so it's your job, as the jury, to compensate.

What does that mean? Well, it's an old British term -- an Old English term that means you put weight on this end of the scales to bring them back into alignment. And you, basically, have to decide how much money -- because that's all we can do. We don't have an eye for an eye anymore. The way we deal with

this is money. You have to decide how much money to put on the scales of justice.

Now, to do that, you have to compensate Mr. Hopkins for the life that was taken from him, and the concept is pretty straightforward. You need to decide what is fair trade value to put on the scales of justice to make up for the harm that Mr. Hopkins has experienced and what he will experience for the rest of his life.

A good example of how this works is if you had a horrible car accident, and one of the cars was completely destroyed, and when this happens, juries have to determine what's the fair trade value of that car before the collision, and appraisers would say the car was worth this, and you would ask to write that down. That is what you're doing here. You're coming up with a fair trade value of the life that was taken from Mr. Hopkins.

So let me talk about that life a little bit.

You heard that Mr. Hopkins was someone who worked hard his whole life. He came out to Seattle in the '80s. He started a business. He ran that business for decades. He raised a family. You heard Sarah Hopkins talk about what a great dad Daniel Hopkins was, how he wrestled with his daughters, he was silly. He was always there.

Then, in 2011, he had a tragedy strike. He had to retire. He had to change his whole life.

But through hard work, Dan Hopkins came back. This is not somebody who just sits around and feels sorry for himself. This is somebody who works hard, he has his whole life, and that's what he did in 2011. He worked hard, he tried his best to get back.

And, finally, after several years, he really was able to get back most of his life, and you know that. He was able to really be in a position where he could enjoy his golden years. He could enjoy sailing. He could enjoy helping out other boats on the dock. He could enjoy his children and his grandchild, and, hopefully, other grandchildren.

Now, those golden years were, unfortunately, tarnished by this injury, and now he has to significantly curtail the life that he had to deal with the injuries that he is suffering from.

So you, basically, are the appraisers of what Dan Hopkins lost.

Now, you may be thinking to yourself, How can we come up with a value of Dan Hopkins enjoying his golden years? Each person is unique and priceless, and their golden years are unique.

Well, the answer to that is, there's lots of priceless and unique things in our society, and many of those things we provide a lot of value to, we give them great value. So if someone in the jury room says, How can you put a value on the harm here? Remind them of all the priceless and unique things

that we put value on. It just means that it's worth a lot.

So there are appraisers for high-end homes and paintings, and now there is an appraiser for what Dan Hopkins had taken from him: You. You will be the conscience of this community, and you will decide what justice is in this case.

You probably noticed that there were lots of experts in this case. There were experts on neurology and insurance and physical therapy, but none on the value of what was taken from Mr. Hopkins. And the reason is is that you are the community's experts on that value, and you all have life experience that you need to decide what the fair trade value is for what was taken from Mr. Hopkins.

Now, one question that may come up for you-all is how do we factor in the fact that Mr. Hopkins was vulnerable to this injury because of the 2011 traumatic brain injury? Well, Judge Pechman provided you with the law on that as well.

This is Instruction 32. This is a very important instruction. And what this says is that, basically, it doesn't matter that Mr. Hopkins had this traumatic brain injury in 2011 and that he had recovered so well but that he was susceptible to an injury more than a normal person.

What Judge Pechman says is you should consider all the injuries and damages that were caused by the occurrence, even though those injuries, due to the pre-existing condition, may have been greater than those that would have been incurred under

the same circumstances by a person without that condition.

So what this -- if somebody back in the jury room, says, "Hey, it's not Integon's fault that Mr. Hopkins had a previous TBI," remind them of Instruction No. 32. It doesn't matter. Integon is responsible for all of the damages that he experienced.

Now, you know that Mr. Hopkins, in 2011, before his crash, was doing great. He was working. He was still living a very, very good life. And then he got knocked down by that crash, and that was a significant crash. And when he got knocked down, he had to stop working. He was in a lot of pain. He had a lot of physical disabilities.

But then he worked very hard, and he got nearly back to where he was, and you see that in the medical records. And now, because of the 2016 crash, he's knocked way back down to where he was back in 2011. And, unfortunately, because this is permanent, he hasn't made it all the way back. He's not back to the baseline of where he was in 2015. And, unfortunately, no one is more upset about this than Dan Hopkins. He can't get all the way back. He never will.

So what is the fair trade value of that loss? That is the question. And what I would submit is that he should be compensated for the constant, daily, swaying sensation he has to endure. He should be compensated for the way he has to change his life, the way he thinks about his life, strategizes, how he

has to plan differently, avoid areas, think about his activities, slow down his activities, not do things. He has to be compensated for the way he has to go through life that's completely different than before this collision.

Now, this is a Sisson painting, and many of you are probability wondering why I have a Sisson painting up there now. And the reason is is because the fair trade value of this Sisson painting is about \$250 million. That was how much the seller valued this painting. Why? Because it's unique.

You also probably have heard that Russell Wilson, the Seahawk quarterback, got \$205 million for four years. Why? Because he's unique.

So if someone destroyed this painting, negligently, would there be any doubt that they would be on the hook for the fair trade value of the \$250 million? If someone hurt Russell Wilson so that he couldn't fulfill his contract, is there any doubt that they would have to pay hundreds of millions of dollars?

This is no difference. Mr. Hopkins is unique, he's got a unique life, and the question for you is, what is the fair trade value of what was taken from Mr. Hopkins?

Now, I don't want to make you nervous. We're not asking for hundreds of millions of dollars in this case, or anywhere close to that, but I just do it to make a point. The reason that things like paintings and sports people get the big money they do is because of the uniqueness, and Mr. Hopkins -- you

know -- is a unique man who has a unique loss.

Now, Judge Pechman also gives you the standards to consider when coming up with what the amount should be, and you-all have seen this during the course of the trial, and she tells you that when evaluating noneconomic damages, these are the factors you are to consider.

And based on these factors, it's my job to suggest a number for you, and I will, I will suggest that number for you. But I want to make this clear: Ultimately, you-all are the conscience of the community, and it's you who will decide this; not me, not Mr. Harris, not Judge Pechman. This will be you. And so it's my job to make suggestions; it's your job to decide what the proper amount to put on the scales of justice is. So if you think what I'm about to propose is too little, you should give more, and put more on the scales of justice. If you think what I've suggested is too much, then you should give less. This is completely up to you.

Now, Mr. Strzelec explained that this is what Integon should have done and never did. So what you're going to do is to do what Integon -- what Mr. Hopkins paid for them to do, which was to evaluate what his claim is worth. You're going to do what Integon never did. Under these different damages, what is this claim worth?

And if you break it out, there's a lot of different aspects of this claim. There's the nature and extent of the injuries;

loss of enjoyment of life, past and future; disability, past and future; disfigurement, past and future; pain and suffering, past and future; and inconvenience, past and future.

Each of these elements is different and distinct and has to be considered separately, and these are all factors that Judge Pechman has instructed you to take into account when arriving at the fair trade value for what Mr. Hopkins' damages are from the collision, from the collision to today, and from today through the rest of his life. Judge Pechman tells you to consider all of these factors, and I'm going to go over them in some detail.

Your Honor, we've been going for about a half an hour.

Should I have the jurors stand up and take a stretch?

THE COURT: Yes. Ladies and gentlemen, let's stand up and stretch so we can give our full attention back.

(Off the record 10:06 to 10:07)

THE COURT: Mr. Wampold, you may continue.

MR. WAMPOLD: Thank you, Your Honor.

So there is really three distinct areas of time that I think you have to consider when compensating Mr. Hopkins. One is, from the accident through when Dr. Taylor finally said, Yep, you're definitely not going to improve. She thought he wasn't going to improve at the beginning, you heard her say that, and then, ultimately, she concluded, Yep, you're not going to improve at all.

So from that date -- from the accident through that date,

from the date -- that date through trial, and from trial through the remaining 14 years of his life's expectancy. That's Mr. Hopkins' life expectancy. He's 72 now, so it's about 86 that is his life expectancy.

So his damages really vary depending on that time frame, and you know that. You know that how he experienced these events was different at the beginning than it is today and will be into the future.

But we have to really remember that how he didn't experience these events in a lump. It's not like he experienced the first year all at once. He experienced it hour by hour, day by day. And that's really how you have to analyze it is, what is a reasonable daily rate through, for example, the first time period? You know at the beginning it wasn't just the vertigo that he has now. He had many other symptoms, and his life was really hard.

So the question is, at the beginning of this injury, when he had -- couldn't listen to music, he'd get headaches all the time, he had cognition problems, what is a daily rate? And I, actually, think that Integon was fair in how they determined a daily rate during the initial time period, when he was experiencing the vertigo and the return of his brain-injury symptoms. How did they value that initial time period?

Well, you heard Ms. Gordon, actually, talk about this on the stand, and she said, "I will increase offer to \$40,000,

based on Kutsy's report that three months of treatment for cervical strain and vestibular therapy were likely needed from this accident."

So what she's really saying is that they're going to just consider that he was only hurt for three months, 90 days, and after 90 days, he got all better.

And she explained that \$40,000 wasn't her evaluation, because she knew that he had already received some funds, so she, really, explained that her valuation was, Well, we're offering \$40,000, he got \$10,000, and he also got \$25,000, so we, really, are valuing his claim for those 90 days at \$75,000.

And if you break that into a daily rate, it equals about \$833 a day, which is about right for that time period. If you go back and look at his medical records, that was a really tough period of time. And it breaks down to waking hours. If you look at 16 hours a day, it comes to about \$50 an hour, and I would venture to say that if you put a want ad out and ask somebody to experience all the headaches, all the cognition problems, all the problems he had during that time period, you'd have a very hard time getting somebody to endure all that for \$50 are a day. So it seems reasonable.

So if you apply that through that beginning period, from the accident through when he reaches maximum medical improvement, this is what the analysis looks like. I, basically, took \$800 a day and broke it down by these different

categories that Judge Pechman has given you.

You know the nature and extent of his injuries, and you know they're profound. The headaches, the balance issue, and the resumption of his TBI, and it affected every aspect of his life. And then so if you apply \$300 a day for that element, you get \$261,300.

Then you have the loss of enjoyment of life. This is really, really significant, because you heard that Mr. Hopkins had really made it back to enjoying the life he wanted to. He was volunteering around the dock, taking multi-month sailing trips to the far reaches of Canada, and he lost a lot of joy of life during this period. I would say give him \$100 a day for this loss, which is \$87,100.

Disability, being disabled. You heard how frustrating that is for Mr. Hopkins to not be able to do the things he was able to do before; get upside down in people's boats, being able to walk up and down a dock without a cane. For this, I would recommend you give \$100 a day, and that's \$87,100.

Disfigurement. So disfigurement applies to any alteration in a person's appearance or presentation, and you know from the testimony Hopkins has disfigurement. He doesn't appear to people the way he did before. He's more tentative, he's more cautious, he has trouble -- he walks with a cane, he walks differently. You know that during this period he appeared very different, and you heard Mr. Moore talk about that, how

different he appeared. For that, I would recommend \$50 a day, \$43,550.

Suffering. Now, pain and suffering are different, and we're going to get to pain, but this is just suffering. We all know they're different. You experience the pain, but then you suffer. You suffer because the pain won't go away. If you have a headache, and you can take Advil and you know it's going to go away and you're not going to get it back forever, or maybe months, you don't have that much suffering. But when you continue day after day after day to have pain, you suffer. You have depression, you think about what's lost, how your life has changed, and for that, we would recommend \$100 a day.

Then there's the pain. And the problem with pain -- and you know he had a lot of pain during that time period, it's throughout his record -- the problem with pain is, we all know it gets your attention to the exclusion of everything else. It commands your attention, it demands your effort, it takes over your life, it zaps your strength, it wears you out. It takes you away from the people you love because it makes you unavailable, it makes you irritable, angry, unable, depressed, bitter, tired. You're no fun to be around when you're in pain, and, for that, we think you should include \$100 a day.

Inconvenience. You know that there was a lot of inconvenience here. Mr. Hopkins had to go to 59 medical appointments during this time period, and he had to spend a lot

of time doing his own physical therapy and taking care of himself, not overdoing it. That is inconvenient, and for that we think you should give \$50 a day.

The total comes out to \$800 a day, which, I think, if you see how this is broken down, that seems reasonable. So for that initial time period, we would recommend that you include \$696,800 in your verdict.

Now, after that, you heard that Mr. Hopkins did improve. He improved substantially. He was doing much better. But he still -- you know -- is not back to where he was, and he still has to completely change his life. If he doesn't completely change his life, he gets these horrible headaches.

And so we came up with an amount for that time period. From September 12, 2018, through trial, through yesterday, we came up with an amount of \$200 a day, which comes out, for waking hours, to about \$12 an hour, which seems, sort of, the minimum that you should compensate Mr. Hopkins for an injury like this, and that works out to \$152,400.

Now, for the rest of his life, Mr. Hopkins is expected to be on this planet for another 14 years, and that works out to 5,110 days. And applying that same math, it comes out to a \$1,000,022.

So this is what we're recommending that you include for general damages. And what I would say to you-all is, if you don't agree with the numbers, that's fine, apply different

numbers. But I think the methodology should be like this, because this is how he experienced these injuries. He experienced it minute by minute, day by day, hour by hour. So whatever analysis you do to come up with how much these different elements are worth in general damages, it should be some method like this. But we would recommend that you use this \$1,871,200. And if you add that to the medical bills, it comes up to \$1,882,131. And if you think it should be higher, make it higher; if you think it should be lower, make it lower. This is up to you.

Now, I can anticipate what Mr. Harris is going to say, because he said it in opening. What he said was, "Hey, this case isn't possibly worth seven figures because there wasn't a lot of visible property damage."

And if you remember, he didn't even show you, till very late in the trial and didn't show you in opening statement, that there actually is visible property damage. There may not have been a lot to Mr. Hopkins' car, but to Ms. Montes' car, there was enough force to bend the metal on the license plate, and there was enough force to bend the hood.

And notice they didn't even provide these photos to Dr. Kutsy. So they had Dr. Kutsy say the forces weren't that great, but they don't even provide the photos that show it was great enough to bend metal.

Also, we all know, it's common sense, that you don't have

to have a lot of property damage for people to be seriously hurt, and, besides, common sense, you heard the medical testimony of Dr. Taylor and Dr. Eaton explain that; that people often are really hurt, even when there isn't a lot of property damage.

Why is that? Why are people sometimes really hurt when there isn't a lot of property damage? Well, the reason is is it's not the metal bending that hurts us, right? If you're in a horrible collision and your car collapses on you, you get hurt. But what happens in a collision like this is, it's not the property damage. It's the sudden acceleration and deceleration of your head and neck.

So you heard Mr. Hopkins say his neck and head suddenly went forward and then banged against the headrest, that is what causes the injury. And we all know this makes common sense that you can be hurt this way.

Did you ever notice that little kids constantly play a game where they surprise each other? They jump up behind each other and hit each other in the back and laugh, and everybody thinks it's funny? But adults, we don't do that to each other. And why don't we do that to each other? The reason is is we know that if you suddenly hit somebody from behind and make their head snap forward and backwards, you can really cause harm, regardless of whether there's property damage.

So an example would be, I run -- I'm a runner, and I run

about eight miles an hour. If I put Mr. Hopkins -- and I would never do this to him -- but if I put him in the courtroom, in a chair, and I ran up to him and he's not paying attention, he's looking other places, and I ran up and I ran as fast as I could and I hit that chair, is there any doubt, with his prior injury, that his head would snap and go backwards and forwards, and he could be very badly hurt? Would it be fair if I did that -- which I never would do to Mr. Hopkins, I would never do that -- but would it be fair, if I did that, to say, Well, there's no damage to the chair? Of course not. The answer is of course not.

The problem here is the snapping of the head and neck, and it has nothing to do with the amount of visible property damage.

The argument that Mr. Hopkins couldn't have been badly hurt here doesn't make any sense, also, because you all know that he was vulnerable to an injury, so it didn't take a lot of force. But we also know there wasn't just enough force to bend that license plate or bend Ms. Montes' hood. There was also not -- enough force to hurt someone who wasn't vulnerable in the collision, Mrs. Hopkins.

Mrs. Hopkins was badly hurt in the collision, and she had nerve damage, and it took her a year to get better. It shouldn't be surprising that there was enough force to badly hurt Mr. Hopkins, who was vulnerable, when Mrs. Hopkins took a year to improve.

So the final thing that the defense does, in trying to argue that this isn't a large case, is they bring you Dr. Kutsy. And his testimony, I have to say, was not totally clear to me, but this is what I gleaned, and we'll see if it matches what you gleaned.

He concedes that Mr. Hopkins was hurt. He just thinks that he should have, you know, miraculously woken up on January 1st, 2018. And you're going to have to decide who to believe; Dr. Kutsy, on the one hand, that Mr. Hopkins should have woken up on January 1st, 2018, and been all better; or Dr. Taylor, Dr. Eaton, the Hopkins, the medical records that all show that that's not what happened; that he was injured, and that his injuries haven't gone away.

So how do you evaluate Dr. Kutsy's opinions? Well, again, Judge Pechman, in her wisdom, gives you some guidance.

This is Instruction No. 10, and Judge Pechman tells you, "In deciding the facts of this case, you may have to decide which testimony to believe and which testimony not to believe. You may believe everything a witness says, or none of it. In considering the testimony, you may take into account," and then she gives you a bunch of factors, and I want to talk about a couple of these factors.

The first factor is the opportunity and ability of the witness to see or hear or know the things testified to.

So you heard that Dr. Kutsy has never even met Mr. Hopkins,

let alone examined him. So you have Dr. Eaton and Dr. Taylor, who, between the two of them, had dozens and dozens of visits with Mr. Hopkins. And do you remember Dr. Eaton's testimony? It probably seems like a long time ago, but if you remember Dr. Eaton's testimony, what she said was, "The day I know my patient the best is the day I discharge them, because every time you meet with them, you learn."

And you don't just have Dr. Eaton and Dr. Taylor. You also have Dr. Weakland, and you have the physical therapy notes from all those other physical therapists. They knew Mr. Hopkins well. They worked with him day in and day out. They did all kinds of objective tests. And if you look at the -- if you have any doubt about this, look at the physical therapy notes, the dozens and dozens of notes. They're doing all kinds of tests. And you heard Dr. Eaton say, "The tests always correlated with what he was telling us, we never doubted him, we found him to be honest and truthful." That is the greater weight of the testimony you apply; number one, the opportunity and ability to see or hear the things they testified to. The fact that these people all had close, intimate contact with Mr. Hopkins, and Dr. Kutsy didn't, should be important.

Now, another factor here is No. 4, the witness's interest in the outcome of the case, if any.

Dr. Kutsy makes over \$600,000 testifying on behalf of insurance companies. Now, compare that to Dr. Taylor or

Ms. Eaton. They have nothing to gain by this. Whether you agree with them or don't agree with them, they're just going to go about seeing their patients.

Now, meanwhile, Dr. Kutsy has a big interest in how this case comes out. If you believe him, they will hire him again, and that is an interest in the outcome of this case. And this isn't theoretical. You saw the example in the record, where Cliff Wilson, that defense attorney that they originally hired, he said, "Well, there was a case where we hired Ms. Reif, and the case didn't turn out very well, so I'm not sure if we should use her." So Dr. Kutsy has \$600,000 worth of reasons for how he wants the outcome of this case.

Number 5 is bias, what bias or prejudice did they show?

Well, you know the bias of Dr. Kutsy. On the other hand, you've got Dr. Taylor, Ms. Eaton, these other witnesses, there's no bias. They're just in here telling what happened with their patient.

But Dr. Kutsy, on the other hand, he regularly works for insurance companies. And you heard him. He gets hired. He makes \$600,000 a year working for insurance companies, and a high percentage of the time -- he told you this yesterday, he was reluctant to tell you -- but he told you, yesterday, a high percent of the time when he gets hired, he disagrees with the diagnosis of the treating doctors, the doctors who actually are going to help the patient.

Dr. Kutsy has one job, and that is to keep his job. As long as he keeps saying that everybody is better in three months, that the treating doctors are wrong, that the injury was minimal, that the person didn't suffer a concussion, despite what the providers say, as long as he keeps saying that, there will never be a shortage of insurance companies that are willing to hire him, and he will keep on earning \$600,000 just to parrot the same opinion in every case.

You also saw the bias in the real time, live on the Zoom trial. Remember he tried to tell you, at the beginning of his testimony with Mr. Harris, he said, "Well, one of the reasons that we know Mr. Hopkins didn't have a concussion is because no one diagnosed him within 48 hours." And on direct, Mr. Harris had him talk about Dr. Taylor, six weeks later, diagnosing concussion. But what he didn't mention, even though he knew about it, was that Dr. Weakland, in fact, had diagnosed a concussion, and had done it within 48 hours.

So when presented with that by my colleague, Mr. Gahan, what did he say? He said, "Well, the record isn't that clear. It's not that clear if Dr. Weakland meant a concussion because of the collision in 2016, or if she was just referencing a historical concussion."

But that is not what the record shows. You all have seen this. This is in Exhibit 7-2, and it could not be more clear. "AP," you know what that means. "Assessment plan." The

assessment was, "concussion injury of brain, personal history of traumatic brain injury." Dr. Weakland put both. The diagnosis here was concussion, and this was within 48 hours, and you saw Dr. Kutsy try to ignore that, and then try to muddy the waters.

Also, remember, on redirect, Mr. Harris had him say that it showed he was walking within normal limits and that he had no balance issues on that visit with Dr. Weakland. He, sort of, implied in his testimony that, "Well, that must have come up later," but that's not what this record shows. If you look at Exhibit 7-1, it says, "Balance not tested, as patient off balance with standing and with eyes closed, holds on to wall." Dr. Kutsy had these records, but he showed his bias in real time.

Finally, the reasonableness of the witness's testimony in light of all the evidence. So you have to decide the reasonableness. That means use your common sense. Does it make sense that, after all he went through, he woke up on January 1st, 2018, and was cured? It makes no sense.

Does it also make any sense, other things he said, like, "We know he's not hurt because there was a gap in treatment"? So that's what he said. If you look back at your notes, he said, well, because he didn't go to the doctor on Sunday, when the doctor's office was closed, that means he's not injured.

Or the fact that there's times when the PT said, "Yeah, go ahead and go on vacation. Do your physical therapy at home."

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We all know that you can have gaps in treatment. That doesn't mean you aren't hurt. It just means there's a period of time when you're not going to the doctor. If what Dr. Kutsy was saying was true, that every time there's a gap in treatment, that means people aren't really injured, that means that everyone out there who suffered a personal injury and wasn't able to go to the doctor during COVID times, that they're going to be able to say, in a courtroom, Well, they must not have been hurt because there's this gap in treatment for months, where they didn't get to see the doctor. It doesn't make any sense, and Judge Pechman tells you that you're allowed to look at the reasonableness of the witness's testimony in light of all the other evidence.

Now I want to turn to the other claims in the case.

Your Honor, it's 10:30. Do you want me to keep going here?

THE COURT: I think what I'd like to do is have us take our 15-minute break. I need to rest the court reporter, and we've now been at it for an hour and a half here.

So ladies and gentlemen, please take your 15-minute break. You can be excused to the jury room, and we'll be back with you at 10:45.

THE FOLLOWING PROCEEDINGS WERE HELD OUTSIDE THE PRESENCE OF THE JURY:

THE CLERK: Your Honor, they are all in the jury room.

THE COURT: Okay. Mr. Wampold, can you tell me about

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1
     how much more you have here?
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               MR. WAMPOLD: I've got about 25 minutes left, Your
 3
     Honor.
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               THE COURT: All right.
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          Then, Mr. Harris, we'll start with you -- Mr. Cogswell,
     would you talk with the jurors, before you bring them back in,
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 7
     to see if their lunch is delayed, whether that causes any
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     difficulty for them.
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               THE CLERK: Yes, Your Honor.
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               THE COURT:
                           I'm just trying to figure out what the
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     options are, whether we should break again or push on through.
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          Mr. Wampold, have you timed your rebuttal?
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               MR. WAMPOLD: We'll be about 30 minutes, Your Honor.
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               THE COURT: Okay. Let's take our break, please.
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                (Court in recess 10:32 a.m. to 10:44 a.m.)
                           All right. Let's bring the jury back in,
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               THE COURT:
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     please.
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               THE CLERK:
                           They are on their way.
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               THE COURT:
                           Do we have everyone?
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               THE CLERK:
                           I think we are waiting for one more to
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     connect.
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               THE CLERK:
                           Everybody is here, Your Honor.
23
                   THE FOLLOWING PROCEEDINGS WERE HELD
                        IN THE PRESENCE OF THE JURY:
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               THE COURT:
                           Mr. Wampold, you may continue.
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MR. WAMPOLD: Thank you, Your Honor.

So now I want to turn to the other claims in the case, and these claims all have to do with how Integon handled

Mr. Hopkins' insurance claim.

And the first thing that probably crosses your mind, as you listened to all of the instructions, is that all of these claims have different names, and there's a lot of them. But it's all based on similar conduct. And why is that? Why does the law prohibit similar conduct in so many different ways? Why does the law provide policyholders with so many different claims when they're mistreated by insurance companies? And the answers are actually in the instructions themselves.

You have Instruction No. 19. This is not Instruction No. 19, but you've got Instruction No. 19, which lists the laws that insurance companies must adhere to if they choose to do business here in Washington.

And you see some very unique language for the business of insurance, and this says, "A single violation of a statute or regulation relating to the business of insurance is an unfair or deceptive act or practice. A violation of these statutes and administrative rules also affects the public interest."

And what does that tell us? What it tells us is that the reason there are so many regulations and laws for policyholders is because this doesn't just affect the policyholders -- it doesn't just affect Daniel Hopkins -- it affects the public

interest.

What the instructions are getting at is that this affects the public as a whole. And so when an insurance company takes advantage of its policyholders, it affects all of us. The public relies on insurance for protection when tragedy strikes, and because of that, we need insurance companies to keep their promise; not use their vastly unequal bargaining power to bully policyholders, or evaluate claims in a way that protects their interests, not policyholders.

And just like violation of these laws affect the public interests are the enforcement of the laws. And when they are held accountable here, like in a case like this, the verdict resounds everywhere, and that is what public interest means, and that is why the law provides so many different remedies, to make sure that insurance companies behave properly, because when they don't, it affects the public interest.

And it may seem daunting. With all of these claims, you may have gotten anxious as you listened to the instructions, but I think I can simplify them for you.

And, basically, what these instructions explain is that when insurance companies violate the statutes and the regulations and the behavior that Judge Pechman has instructed you, that you should find in Mr. Hopkins' favor on those claims, and I'll explain that, but that's the basic concept.

So with that in mind, let's turn to our first claim that

deals with Integon's conduct, and that's the violation of the Consumer Protection Act, and this is Instruction No. 18 on the CPA. And again there's that phrase, "the act or practice affects the public interest." In that same vein, one of the unique aspects of this instruction is that you are the enforcers here of a Consumer Protection Act violation. Sometimes that's the Attorney General's Office that enforces violations of the CPA, but, in this setting, these types of violations, it's you. And it makes sense to have members of the community be the ones to enforce these Consumer Protection Act violations.

So Instruction No. 19 explains that, "A violation, if any, of one or more of the following statutory or regulatory requirements is a failure to provide benefits: An unfair or deceptive act or practice in the business of insurance under the Consumer Protection Act."

So, basically, when you violate these rules, then you are violating the Consumer Protection Act. That's what this says, and this is consistent.

When Mr. Strzelec testified, he explained that these were standards in the industry for how insurance companies are supposed to behave. But now you know, from reading your instructions, that these are all based on laws.

I went ahead and wrote in the numbers of each law that backs up these rules.

So they aren't just industry standards, they're also law.

And, basically, what this says is, "A violation, if any, of one or more of the statutory or regulatory requirements is a violation of the Consumer Protection Act."

So what this sentence means is, we don't have to prove all of the violations that Mr. Strzelec went over. We just have to prove any of them. If you find that they violated any of these rules, then you find that Integon violated the Consumer Protection Act.

So when you're going through these different rules, if somebody back in the jury room says, Well, I'm not sure they committed this one, I agree they committed that one, you remind them that all they have to do for violation of the Consumer Protection Act is find that any of the rules has been violated.

Now, the same is true for the Insurance Fair Conduct Act, the next claim on your verdict form.

A violation of the Insurance Fair Conduct Act is established if we prove that Integon unreasonably denied benefits. That's number one there.

Now, we know, in this case, that Integon denied the benefits. You heard he was in a 2016 accident. Everyone agrees he was not fairly compensated, and they have not provided him any benefits. So the question is whether the denial was unreasonable. That's, really, the question for you.

And in Washington, reasonableness is defined by enacting these rules that we've discussed this whole trial. So if you

find that they've violated those rules, that is an unreasonable denial of benefits.

The next claim is a breach of the duty of good faith, and what this says here, in Instruction No. 23, is, the insurer must give equal consideration to its insureds' interests and its own interests, and an insurer who does not deal fairly with its insureds or who does not give equal consideration to its insureds' interests fails to act in good faith.

And, finally -- and you'll see, too, that, for good faith, it explains that "a violation of any of the statutes or regulations is a violation of good faith." And it makes sense because, again, the concept is to protect the public because of the unequal bargaining power of the insurance company.

Finally, if you turn to negligence, this is Instruction No. 29, and it says, "The violation, if any, of a statute or administrative rule is not necessarily negligence, but may be considered by you as evidence in determining negligence."

Again, what this is saying is that if you find that they've violated these rules and statutes and regulations, then that is evidence of what a reasonable insurance company would do. So a violation of any of those rules should be considered as negligence.

So, basically, it's very simple at the end of the day, which is, if you find that the insurance company violated these rules, you should find for us on all four of these claims.

And I believe we've proved that to you by a preponderance of the evidence. We provided you the testimony of Mr. Strzelec -- and I know he was on the stand for a long time, and I promise I won't repeat everything he said -- but basically what he explained was how this claim, following the law, should have been handled, which is, as soon as they understood that there was this claim, they should have been in a position to evaluate it. And he says at the beginning of the claim, they were going down the right track.

This is Christina May from February 6th of 2018, and she says, "If the injury complaint is substantiated, it's very possible this case could potentially be worth the policy limits, depending on the severity of the balance and vertigo issues."

So basically what Mr. Strzelec is saying is, yeah, she recognized that if there's proof that the gravitational vertigo he's got was caused by the accident, was permanent, and was seriously affecting his life, they need to pay limits.

Then they give it to a different adjuster, and that adjuster also writes down -- she has a conversation with Ms. Rosato, and she understands that Dr. Taylor is saying this is permanent, it is not going to improve. And basically they have a conversation, and Ms. Rosato says, "Yeah, I'll outline in the letter what Dr. Taylor had to say, and I'll give you all of the backup, all of the substantiation," and Ms. Rosato did that. And you'll have this exhibit, 2-22. But Ms. Rosato really walks

through all of his injuries and all the objective testing they've done to show the injuries and all the treatment, and says, "In light of the time that has passed since the collision, and the fact that Dan underwent regular physical therapy treatments for a year and a half but is still experiencing gravitational vertigo, Dr. Taylor says that Dan's vertigo will not improve any further," and demands limits.

Mr. Strzelec explained, at this point, that a reasonable insurance company has an obligation to look at that and say, Okay, what evidence do we have before us? We've got the evidence of what Dr. Taylor says in her records, we've got the evidence of what is reported, what their opinion is. You've got all of the evidence, all of the physical therapy notes. So if we take that injury, and we treat them with equal consideration, and go through all of these damages and really analyze, you know, what would a jury do with this, what you would realize, from the analysis that we did this morning, is that this claim is worth way more than the \$250,000, and what they should have done was paid limits.

And this is a record you may not have seen yet. This is Exhibit 2-26. But, basically, this is an email from Mary Gordon to her boss, and the truth is, on April 17th of 2018, she had a pretty good understanding of what Dan -- Mr. Hopkins had experienced. She understood that he had a mild concussion, that afterwards had post-concussive syndrome, he had an inner ear

disturbance resulting in gravitational vertigo, he had headaches, he had cervical strain. She really understood, at this point, what his injuries were. So if we look at the rules here, if you give equal consideration, number one; if you reasonably evaluate, number two; if you -- what you need to do is do No. 4, which is makes a prompt, fair, and reasonable offer, which would have been to pay the limits.

But we know that's not what she did. Instead, what she did was, she did what's not allowed, and she just speculated, speculated that it wasn't permanent, with no medical evidence; assumed that, actually, this wasn't affecting his life, even though it was, and did a low-ball offer.

Now, she claims that she did all of that, even though she's not a doctor and she didn't consult a doctor and she didn't consult a nurse -- she said she did that because she thought, based on this one record, that there was some evidence that he had had these vertigo issues before the collision, that he was experiencing the same problems he is now before the collision.

And then we asked her, on the stand, "Well, what about this record?" I mean, this is pretty important to that analysis, like, if you're going to conclude that he was experiencing this before, what about the fact that there is this exhibit, 34-2, that says that, you know, he had a full checkup in December of 2015, and it showed he had no fatigue or weakness, no vision or hearing problems, no problem with headaches, that his mood had

been good, sleeping well, no irritability, no dizziness. What about that record?

Now, very important -- this is, obviously, a very important record, and what Ms. Gordon said on the stand -- and you heard her -- she said, "I didn't have that."

So here's a fact, right? She either had it or didn't, and we can prove she had. We know she had it because she sent it to Kutsy. It was part of the demand package, and then she sent it to Kutsy. Why would she get on the stand and say that? Why would she get on the stand and take the risk and say, "I didn't have that"? The reason is because she knows it's devastating to what they ended up doing.

For them to speculate that he was having these problems before, when they had clear proof that, in December of 2015, he had a full physical evaluation and was not having these problems. She knows that that is absolutely devastating, and makes her refusal to give the money clear, which is exactly what she was doing, which was, We just don't want to give the money. Yeah, you deserve it, yeah, you had this new injury, yeah, it's really affecting your life, but we don't want to give you the money.

So now, at that point, there's, obviously, a standoff, because Ms. Rosato is making clear he's not going to accept less. He deserves the limits. He's not going to take your \$17,000.

So what does Ms. Gordon do at that point? Does she just call around to say, Hey, who is a reputable neurologist who can answer this discrete question for me? Who is a really good neurologist in town? Maybe call some friends in Seattle, "Who do you know who is a good neurologist?" No, she calls a defense attorney, the defense attorney who represents Integon Insurance Company, and asks him for a referral, and, basically, she says, "Yeah, we want a records review," and he says, quite intelligently, quote -- the last two sentences -- "He has never been able to get someone to provide an opinion based on a record review. Records won't show them what they need in order to provide an opinion."

And that makes sense. You heard Dr. Taylor explain how important it was for her to (sound interruption) --

Does everybody hear that noise? Okay.

Your Honor, is there somebody that can mute?
Okay. Great.

You heard Dr. Taylor explain that it was very important for her to come up with her diagnosis to actually do a physical exam on Mr. Hopkins and to really understand his history so it makes sense.

So then Ms. Gordon says, "Asked if there will be a downside to doing the in-person exam," and then she says, "It will likely go into arbitration or litigation. Not really, other than if we do an IME, we have to share it with him. If we do a records

review, we can just hide it."

That is not showing equal consideration for Mr. Hopkins.

That is assuming this is going to go to trial. And it explains what Ms. Gordon is up to here. She is not trying to get to the truth. She doesn't really have an honest question about his situation. She actually just wants to set Integon up in the best possible situation to go to trial. And you heard

Mr. Strzelec say that's not fair, that's not reasonable, that's not acting in good faith.

And now what happens is -- and one of you asked a great question about the time frame, and you've got Instruction No. 28 that explains the time frames, and they've now violated all the time frames.

So that happens in May. They don't even hire Dr. Kutsy, for the first time, until August, and they don't even report back to Ms. Rosato until October. They violate all these regulations about time. And you have these here. Here's Ms. Rosato June 22nd, over a month later, "What's the status?" July 27th, a month has gone by, "What's the status?" August now --

So this note -- again, I don't know that we showed it to you, and if we did, we haven't focused on it enough, but I think it's really important. This is Exhibit 1-16. "Received email from insured's attorney, Ann Rosato. She said it's been over three months since we told her we were going to a records

review, and the delay is unacceptable. She will wait two more weeks, and then proceed with legal proceedings. Never received fax from Rockwell. Will move forward with Dr. Kutsy if defense counsel is okay with this doctor."

So she wants to make sure not, Hey, is Dr. Kutsy a reasonable person who is objective? She wants to know, "Is he acceptable to the defense attorney, the lawyer that's going to defend us? Is this somebody we can rely on in a trial," just like this. That's what she's asking, and that's not fair, that's not reasonable, and that's not acting with equal consideration of Mr. Hopkins' interests.

And she, basically, then just throws up her hands. "It's unlikely we'll get a response in the next two weeks, so I want to make sure he is okay with this doctor before we send out the file material."

So what she's saying here -- again, I think this is a very important exhibit. She's, basically, saying, Yeah, you know, we offered \$17,000. It's probably not reasonable. We also know we've blown all the deadlines. We're going to get sued, so let's just make sure Dr. Kutsy is someone we can rely on at trial, because we're going to end up right where we are.

That is exactly what the insurance company did, and that is not fair and that is not reasonable, and that violates, basically, all of these rules, and they did violate all of these rules during this time frame.

They didn't give equal consideration to the insured's interest; they didn't reasonably evaluate; they denied and reduced benefits without a reasonable justification; they didn't make a prompt, fair, and reasonable offer; they didn't reasonably investigate; they didn't update the insured about the claim every 30 days and respond to timely communications within 10 days. Instead, what they did was they forced us to all be here, and that, also, is a violation of the insurance rules and regulations.

So now, when you're asked, do you find that Integon violated the Consumer Protection Act? We think the answer should be, "yes," because we've proven all of these. We only need to prove one, but we've proven all of these.

The Insurance Fair Conduct Act; same thing, the answer should be "yes."

Did they fail to act in good faith? Yes.

Do you find they acted negligently? Yes

Now, I'm going to spend the last bit of my time talking about the damages that were caused by Integon's treatment of Mr. Hopkins, because that's what answer you have to put in for each one of these. What do you find the amount of damages?

For the Consumer Protection Act, that is the loss or diminished assets or property.

So, here, the diminished assets or property is, he had to pay \$931 that he didn't have -- right? -- because they paid

\$10,000 in medical bills, but he had to pay \$931 of his own, and he had to pay -- you heard -- \$16,000 just to get to this trial. So that is the amount we think you should put in this column. We think the number should be \$16,931.

Insurance Fair Conduct Act, what are the total amount of damages for that? Well, he gets the same damages, the loss or diminished assets or property, but he also gets emotional distress damages. So you have to ask yourself, what's the fair trade value for making up for that harm?

Again, there's been an injustice. You know that. There's been an injustice, and the scales of justice are out of alignment. How much money do you have to put back for what they put him through? The insult; treating him like an adversary when they're supposed to treat him like a customer. What is the value to a citizen when a corporation abuses its power? What is the value of having to sit through this trial, have your doctors hauled in, in a public courtroom, imply that you're a liar?

You heard from Kevin Moore, Sarah Hopkins, Irene Hopkins, how horrible this has been for him to have his insurance company treat him like the enemy. You saw on the stand how horrible it was to get cross-examined by Mr. Harris, to have his doctors questioned, to have his own veracity questioned. This is his own insurance company. All of is that is compensable. And, again, you will decide how much to put on the scales of justice for that harm, but we believe that that harm should be a million

dollars, and we would ask that, for the Insurance Fair Conduct Act, you put \$1,116,931 on that line.

Failure to act in good faith. Again, the damages are really the same. The emotional distress and the lost/diminished assets, we believe that number should be \$1,116,931.

The negligence claim, what are the damages for that?

Again, the same damages, and again, we think you ought to put that same amount down, \$1,116,931.

So then it asks you to total the damages, and the reason this is really important is, no one, including us, wants Integon to have to pay for more than you've awarded. So to be clear, what we're asking for this part of claim, how they handled the insurance claim, to put in a total of \$1,016,931. Basically, the other damages are duplicative, so the total here should just be \$1,016,931.

I'm just about done, but I want to say, at the end, thank you, all, for your service. You know this case is important for Mr. Hopkins, it's important for the public interest, and you are acting to protect that public interest. You are here to set standards, to enforce the laws, and to hold insurance companies accountable.

What you do in deliberations will be on record in this courthouse forever, and we would ask that you deliver justice for Mr. Hopkins and set things right, please.

Thank you.

THE COURT: All right, ladies and gentlemen. 1 2 about let's stand up, take a little stretch, shake it out so we 3 can turn our kind attention to Mr. Harris in a moment. 4 (Off the record 11:12 to 11:30 a.m.) 5 THE COURT: All right, ladies and gentlemen. Please 6 give your kind attention to Mr. Harris. He has the privilege of 7 giving the closing argument on behalf of Integon. 8 Mr. Harris? 9 MR. HARRIS: Thank you, Your Honor. Can I share my 10 screen? 11 THE COURT: Certainly. 12 DEFENDANT'S CLOSING ARGUMENT 13 MR. HARRIS: Can everybody see that? 14 May it please the court, counsel, ladies and gentlemen of 15 the jury. 16 I want to start, similar to where Mr. Wampold started, by 17 thanking you for your time, your dedication, and your attention during this trial. 18 19 You heard from Judge Pechman -- I think it was on Friday --20 that this trial made her more nervous than any other trial she 21 had during her long career. I'll be honest. I felt the same 22 wav. 23 When we found out a little over a month ago that we'd be 24 doing this trial by Zoom, I didn't know what to expect, but I 25 knew that the only way this would work is if everybody bought

in. If everybody was committed to this, they showed up, they paid attention, and did their role. And I have to say, I've been pleasantly surprised by the way this has gone, and your attention to the details and your participation in this case, I just want to start by saying thank you for your time and dedication here.

At the beginning of this trial, I told you this case is about striving to do our best, and that Integon strived to do its best in its evaluation and handling of Mr. Hopkins' UIM claim.

Now, in this case, plaintiff's counsel and their witnesses have asked you to hold Integon to the wrong standard. They've asked you to check every box, dot every i and cross every t.

While it has a corporate name, Integon is run by people. It is people that operate the company, people that investigate and administer claims, people whose sole job it is to come up with an evaluation and settlement of the appropriate claim at the appropriate value. Like all of us, they're not always perfect. It's for that reason that the law doesn't require them to be perfect. It only requires them to be reasonable and to not place their interests over those of their customers.

Now, despite the efforts to tap into your prejudice and sympathy for Mr. Hopkins in this case, you swore an oath, at the beginning of this case, that you would decide it based on the facts and the evidence, not the arguments of David and Goliath,

as Mr. Wampold alluded to during his summation, and by not appealing to your passions, as plaintiffs have tried to do repeatedly throughout this trial, but based on the facts and the evidence that you heard during the course of this trial.

One of the jury instructions that Judge Pechman provided to you in this case talks about prejudice, and it says that all parties are equal before the law. And while you may feel some compassion for Mr. Hopkins and his family, you must decide this case based on the same consideration for my client that you show for him. Our system of justice depends on it, regardless of who the parties are, that they are being treated fairly and equally in the eyes of the law.

And Mr. Wampold also mentioned this jury instruction during his summation, and I want to bring it up again to talk about it from our perspective. Because it says the plaintiff has the burden of proving their case by a preponderance of the evidence. That means you must believe that all of the elements, for each of their claims, have been proven on a more-probable-than-not basis. And if you find that some of those elements have not been proven, for some of those claims, you must return a verdict in favor of my client.

Now, remember the issues that you're being asked to decide. I showed this to you earlier on, and this, really, relates to some of the extra-contractual claims. I'll talk about the UM benefits and the UIM claim later on.

The first question, really, asks you, but did Integon fail to use reasonable care? Did my client act in a manner that was unreasonable, frivolous, or unfounded? Did my client unreasonably deny the payment of benefits?

These all really come down to the same question. Was Integon reasonable in its decision to not agree to pay the \$250,000 demand in addition to the \$10,000 in PIP, the \$25,000 from Progressive, and the \$1,064 in repair costs to Mr. Hopkins' car.

You've seen no evidence in this case that plaintiff ever offered to settle for below \$250,000. So that was, really, the question that was being asked: Were they willing to pay that amount, or were they going to try to evaluate it and then settle it for a reasonable sum?

Now, you heard from both of the experts in this case,

Mr. Strzelec and Mr. Hight. My client was not required to be

perfect. It was not required to do everything possible. It was

only required to act reasonably.

And my client had a basis to investigate whether plaintiff's injuries were related to the 2011 accident or the 2016 minor, low-speed car accident that we're here for today.

Now I want to highlight this jury instruction for you. It talks about the reasonableness of the claim handling, and it tells you that when looking at my client's actions in this case, you must judge them not necessarily from what you heard during

this trial or what occurred with regard to the claim after the lawsuit was filed, but you have to look at it based on the information that was available at that time and based on what occurred at that time.

So if a report or a document was not provided to my client at the time they made their decision, and was never considered by them during their pre-suit investigation and evaluation of the claim, you may not consider it for the purposes of judging the reasonableness of my client's actions.

For example, this is a report from Dr. Taylor. You've seen it. It's dated September 11th, 2018, which is right before this lawsuit was filed.

During the course of this trial, you've heard no evidence that Integon ever received a copy of this document prior to the filing of this lawsuit. There's no record of it in the claim file, there's no mention of it by Dr. Kutsy, there's no record or email or a letter by anybody, including plaintiff's counsel, indicating that this document was provided to my client during the course of their investigation.

For them to suggest, during the course of this trial, that Integon's decision regarding the UIM claim and the value of it was wrong based on this record, is just false. It defies logic, common sense, and defies the law, as you saw in the jury instruction I just showed you.

What the evidence does show is that this was the last

record, that was provided to my client during its evaluation, from Dr. Taylor. This is the April 20th, 2017, report.

Ms. Gordon specifically noted this record in her evaluation, and Dr. Kutsy evaluated and discussed, in his report, that this was the last update from the neurologist regarding the plaintiff's condition.

It indicates that the plaintiff was still making progress with his vertigo. It reports that all of his symptoms had resolved, including his headaches, his fatigue, his cognitive issues. All had either resolved or gotten all the way back to baseline.

Again, this is one year after the accident and right after Mr. Hopkins took his four-month trip to Panama.

This is another important instruction that I want you to look at, and it talks about the negligence standard, and it has a similar concept as what we just got done looking at in terms of reasonableness. It says, "Negligence is some act that a reasonably careful person would not do under the same or similar circumstances, or the failure to do some act that a reasonably careful person would not have done under the same or similar circumstances."

Again, we have to put ourselves in the position of the person in the same or similar circumstances. What did they know, when did they know it, and what did they do about it?

With regard to the IFCA claim, it has a similar concept as

the negligence claim, because it talks about this unreasonable denial of benefits.

Again, we look at the jury instruction regarding reasonableness, and we have to decide what did they know, when did they know it and what did they do in terms of their decision to offer benefits in this case. That's how it relates to the IFCA claim.

It's a similar standard. You can't

Monday-morning-quarterback this. You can't go back and say

hindsight is 2020. You have to look to see what did they know,

and what did they do about it.

With regard to the CPA standards, I showed you this slide in opening, and we've talked about this extensively during the course of this trial, but it's worth noting again that all of these standards have this concept -- almost all these standards have this concept of reasonableness.

I'm going break these down for you.

The communication with the plaintiff, which is almost exclusively done through plaintiff's counsel, was done in a reasonable and prompt manner, but I'll explain that a little more later on.

The investigation performed by Integon in this case was reasonable, both in terms of the scope and timeliness of it.

Integon's efforts to settle this claim were prompt, fair, and equitable at all times. And as you've seen how plaintiff,

through his attorneys, were well aware of the UIM coverage that was available under the policy.

And, lastly, I'm going to show you how Integon did not force plaintiff to file this lawsuit by offering substantially less than the amounts ultimately recovered; not just did they offer lower than what was ultimately -- than what you decide was his damages from the accident, but did they offer substantially less than what was recovered? But, again, looking at this in terms of what did they know and when did they know it.

Based on the information that they had at this time, and based on the insistent and never-wavering demands by the plaintiff's counsel that Integon pay the \$250,000 policy limits, and nothing else, the answer to these questions is going to be yes, that they did act reasonably, and, no, they did not violate the CPA.

So let's go through the history of the claim, because Mr. Wampold went through, and he gave you, kind of, a cursory review of the timeline, but he left out some really important parts, so I want to go through and really do a detailed analysis of how this claim was handled.

So let's start with November 20th, 2017. By all accounts, this was the first time that the claim was submitted to Integon in terms of a request for UIM benefits.

A couple of days before this, plaintiff's counsel had resolved the claim with Progressive for the \$25,000 policy

limits, and only then were plaintiff's counsel in a position to then open up a UIM claim with Integon.

Up to this point, all of plaintiff's medical bills had been paid for by Integon under the PIP coverage.

So from November 20th, in terms of timeliness, we see the UIM claim opened the next day, and we see, the next day, calling the insured's attorney, trying to get ahold of them, trying to get more information.

Also that same day, calling them back, having a conversation, trying to get information, and trying to find out what was going on with this claim. This is prompt investigation to try to get to a position where this claim could be settled.

It was reported here -- this is when Integon learned that the plaintiff had settled the claim with Progressive for \$25,000, and Ms. Rosato indicated that she would be submitting a UIM demand in the next couple of months. There was a discussion about this, and Integon indicated that it would respond to the UIM demand once they had received it. Ms. Rosato understood.

This was a first, in a series of agreements, that showed the cooperation and coordination between plaintiff's counsel and Integon with regard to how the claim was going to be investigated, evaluated, and handled.

Following this telephone call, Integon sent a letter the same day, November 21st, the day after the UIM claim had been submitted, saying, "Thank you for your letter. We look forward

to working with you to evaluate your claim. Can you please send us your demand, along with a complete copy of the medical records you would like us to consider?" Again, showing this collaboration, agreement, the parties are on the same page in terms of how this claim is going to proceed forward.

And at this point in time, they're on the same page in terms of plaintiff would submit his UIM demand a few months later.

So this is a timeline. We're going to add to this as we go through, but we see, in 2017, November of 2017, a letter, response, phone call, letter in response to that letter.

Timely, prompt investigation and communication.

Mr. Strzelec's testimony that Integon just sat back and waited and didn't do anything ignores the clear evidence in this case. As Mr. Wampold mentioned to you, that's something you can look at in terms of the credibility of witnesses. Did they provide accurate statements at all during the course of this case? I'll submit to you, and you've seen during the course of this trial, that Mr. Strzelec's testimony, in regards to Integon just sitting back and waiting, isn't true. That's not what happened, and we'll go through and we'll see why that's not true.

You also heard from Mr. Hight, who said this is common practice in the industry for the plaintiff's counsel to prepare a UIM demand to initiate these types of negotiations. And

there's no standard that requires an insurance company to go out and conduct its own investigation, to pull together the records in order to begin their process of evaluating the claim. They can wait for the UIM demand.

And in this case, specifically, not only was that a common standard of practice, but it was agreed upon. The parties agreed this is how it was going to proceed.

Mr. Strzelec's opinion that Integon acted unreasonably by reaching this agreement with the plaintiff's counsel and waiting for the UIM demand completely defies logic and is not supported by any of the facts in this case.

So the next time we see activity in this case is on February 6th, 2018, and it's about two and a half months later. By this point, we hadn't received the UIM demand yet, and Ms. Rosato called Integon and spoke with Ms. May, who had been assigned the claim.

And during this conversation, Ms. Rosato provided an update on Mr. Hopkins' condition; said, "He went through two rounds of cognitive testing and has deficits in executive functioning and doing complex tasks." Now, she's talking about the 2011 accident here, and this is Ms. Rosato communicating to Integon that Mr. Hopkins has deficits in cognitive functioning and doing complex tasks from the 2011 injury.

"Due to the brain injury, he had to stop working as a marine mechanic and was not able to return. Continued to have

cognitive issues."

These are statements by the plaintiff's counsel to Integon, acknowledging that, from the 2011 accident, there were still deficits and cognitive issues that the plaintiff was suffering from.

She also indicates that Mr. Hopkins is set to see his doctor to determine if there's anything else that can be done with regard to his condition. But, again, no report from Dr. Taylor. The only report they had at this time was the April 20th report from 2017. We'll see what happens a little bit later.

So the same day, Ms. May prepares the PEV analysis. We've heard about the PEV analysis during the course of this trial. You heard from Ms. Gordon that this analysis is intended to not give equal consideration but every consideration for the policyholder's version of the claim. Essentially, it assumes everything that is being said by the policyholder to Integon is accurate. They take everything at face value, and accept it as being true.

So it's a straight calculation of what amount, in total, would plaintiff likely be able to recover from Ms. Montes from the accident.

There are three notable aspects about the PEV analysis.

The first and most notably is it has potential medical specials, and you'll see it's \$32,500 to \$50,500, which, as we know and as

we heard from Mr. Wampold, the actual medical costs are \$10,900 and change. So this is three to five times over what the actual medical costs turned out to be.

Second, the PEV analysis doesn't include any offsets. It doesn't include a consideration of the \$10,000 in PIP or the \$25,000 from Progressive. It is a straight calculation saying what is the total value of this claim.

Third, it does not account for any of plaintiff's medical records, repair estimate, photos of the accident scene, or photos of the damage to the car. At this point, Ms. May had none of that information because she had not received the UIM demand or the medical records from the plaintiff's counsel.

And based on that, and as you heard Mr. Strzelec say, this was a good analysis, "Ms. May did a good job," those were his words, her range is \$111,000 to \$135,500.

So she also prepared what's called a case-reserve analysis, and you've heard about this. It has a separate purpose for what she's doing.

You heard Ms. Gordon testify that this is really looking at in terms of -- of an overall value of the case. So it factors in some of these offsets. So Ms. May still has the medical specials at three to five times what they actually are. She still doesn't have any medical bills, same day as her PEV analysis, but she factors in the offsets, and so she comes up with a settlement range for the UIM claim of \$79,203, and she

specifically notes, "I don't have any medical records at this time."

So based on Ms. May's analysis -- we heard Ms. Gordon testify -- the claim got moved over to the large-loss unit, got moved over to a unit of more experienced adjusters, people who were more equipped to handle this, and it was assigned to Ms. Gordon.

The very first thing that Ms. Gordon does is she calls plaintiff's counsel to get an update on treatment and status of the demand, which we saw before, Ms. Rosato had agreed to provide to Integon. During this call, Ms. Gordon specifically asked for prior medical records and a report from the neurologist regarding his current condition.

Once again, we see an agreement by plaintiff's counsel and Integon as to how the claim would be investigated and the settlement discussions initiated, as she said -- "she," referring to Ms. Rosato -- "will put together all the information and send the demand."

We heard from Mr. Hight about this collaboration, cooperation between Integon and the plaintiff's counsel in this case, and how they worked together and kept each other informed of what was going on, to try to work together to settle this claim.

After she had this conversation with Ms. Rosato, Ms. Gordon sends an email confirming, "I am the adjuster. I'm looking

forward to working with you to resolve this claim." Again, being timely, being responsive, keeping the plaintiff's counsel informed of what was going on and how the claim was going to be progressing.

So here we've got the responsive letters in November of 2017, and then we've got these series of letters in February of 2018, phone calls, emails, letters, keeping each other informed of what's going on, and trying to coordinate getting the information that each side needs in order to evaluate the claim, and try to work together to effectuate a settlement.

Now, Ms. Gordon didn't just sit back and say, "Okay, well, I can wait for the UIM demand to come in. I don't have to do anything else" -- again, as Mr. Strzelec says, sitting back and waiting -- that's not what she did. She prepared an estimate, and she prepared her own evaluation with fresh eyes from Ms. May's evaluation.

By this point, Ms. Gordon was able to find more accurate estimates for the medical specials, so she knew that the medicals were closer to \$9,000 than to \$50,000, and she prepares an estimate based on that, as well as the generals, as well as the information she received from Ms. Rosato. But her general damages were fairly consistent with Ms. May -- which we'll see in a minute when I show you a comparison, side by side -- and her total range -- which both insurance experts agreed -- from Ms. May was a reasonable range, and she had a total of zero to

\$84,000, and she set the midpoint at \$42,000, and that was for the reserve. Again, her estimate of what it would probably take to resolve this case, because she acknowledged that this case could be up to \$84,000.

So, here, we look at the side-by-side estimates. We have Ms. May's on the left; we have Ms. Gordon's on the right. And this is the estimate -- again, you heard from Mr. Strzelec -- was a good plan, was a good job by Ms. May. And what we see here is a striking similarity between a lot of these numbers.

You see that the good plan by Ms. May is not so different from Ms. Gordon's estimate in terms of the high-side value of the claim. You'll notice Ms. Gordon actually has a higher estimate for general damages. Ms. May is still using the \$32,000 to \$50,000 range. Really what we see is a wider range of the damages for the vertigo; acknowledgement by Ms. Gordon that she knew and that she was told by Ms. Rosato that Mr. Hopkins had these deficits and had some cognitive issues, and so she knew there was probably going to be a causation issue here, and she'd also heard that it may be permanent, but she didn't know, and she didn't have a report from a doctor saying that it was permanent at the time.

So she's giving a wide range. She's acknowledging that there's a lot of unknowns at this point. And, again, she doesn't have any of the medical records at this point in time, when she's doing this estimate. But it's a reflection -- there

is a number of factors -- and a high degree of difficulty for Ms. Gordon, using her professional judgment and discretion, when estimating a claim such as this one.

The reasonableness of Ms. Gordon's initial estimate is confirmed by this note, by Mr. Chodacki, which is her manager at the time. Again, not sitting back and waiting for a demand; preparing an evaluation that's then reviewed and approved by her supervisor. They were preparing the estimate based on the information they had at that time, to proactively evaluate the claim so that when the UIM demand came in, they would be prepared to respond in a prompt and timely manner.

You'll also remember Ms. Gordon's testimony about Mr. Chodacki. He was a regional manager on the West Coast for Farmers Insurance before he came to Integon, and he had a lot of experience with claims in Washington. He was very familiar with the laws of Washington, and Ms. Gordon relied on him and his knowledge and experience in handling claims in Washington.

You also heard Ms. Gordon specifically talk about how she and Mr. Chodacki regularly conferred about their claims and that they specifically talked about this claim on multiple occasions.

So that brings us to the UIM demand, March 26th, 2018. As we saw and as we heard during the course of this trial, it was not received until April 3rd, 2018, and plaintiff's counsel asked for the entire policy limit, \$250,000, which was two to two and a half times the estimate prepared by Ms. May and by

Ms. Gordon up until this point in time.

It was not until then that plaintiff's counsel had submitted the medical records as well, so now Ms. Gordon had the opportunity to review the medical records and prepare her evaluation based on those.

So, again, looking back at our timeline, we've got this initial communication in November, where there is an agreement that they're going to provide a UIM demand; there is subsequent conversations in early February, and going into later February, where, again, they're reconfirming their agreement and their plan -- their joint plan -- to investigate the claim by getting a demand, getting the medical records, and then working through the evaluation of it. And then that brings us to the demand, which was dated on the 26th of March but not received until the third of April.

So what we see after we get the demand is, Ms. Gordon gets to work. She reviews and summarizes the demand letter in her notes. She specifically notes a number of medical records that jump out to her, that you're going to recognize because you've seen these repeatedly throughout the course of this trial.

She specifically notes Dr. Taylor's first record of seeing Mr. Hopkins, where she diagnosed him with gravitational vertigo. She also noted Dr. Taylor's third visit, the last visit before this and the only record -- the last record from Dr. Taylor that was provided to Integon, which is the 4/20/17 record, where it's

noted that all of his symptoms had resolved, except for some of his vertigo. The vertigo had improved, and, hopefully, would couldn't to improve. She specifically noted the issue of permanency of the injury and the ambiguity in these records. She also accounted for the fact that plaintiff claimed that he would never return to his pre-collision status.

So she didn't discount these assertions, as Mr. Strzelec noted. She specifically included it in her evaluation as yet one of the factors she was looking at in preparing her evaluation.

And she also noted the record you've heard about a lot during the course of this trial, the September 1st, 2017, record from Cascade. You've heard excuses, you've heard explanations, you've heard allegations about whether this record is accurate or not, but you also heard from Dr. Eaton, and Ms. Emami is a well-respected certified physical therapist. Plaintiff offered you no evidence to undermine her credibility or the accuracy of her record, other than pure speculation and conjecture. We did not hear from Ms. Emami during the course of this trial.

So getting back to the jury instructions that I mentioned at the beginning, plaintiff had the burden of proof. They have not met their burden of proof to show that this record was wrong, was inaccurate, and they certainly haven't met their burden of proof to show that Ms. Gordon's reliance on this record was unreasonable.

The record and its meaning could not be more clear, which is why plaintiffs have gone to great lengths to discount it, but they've offered nothing, in terms of evidence, to disprove it.

So based on this record and the significant prior TBI from 2011, Ms. Gordon realized that she's got two issues: Permanency and causation. And she further documents these issues in her evaluation on April 17th, 2018. She specifically notes that, "While plaintiff's counsel claims the vertigo is permanent, the last record from Dr. Taylor is inconclusive." Again, not taking someone's word for it, not speculating, but giving equal consideration to the evidence, to the medical records that are not entirely consistent with what she's hearing from plaintiff's counsel, and not entirely consistent with each other.

So make no mistake. Her evaluation was not just based on this record, though, it was based on this note that we talked about a little while ago, where she talked to Ms. Rosato, and Ms. Rosato specifically told her about deficits in executive functioning and doing complex tasks, and how he continued to have cognitive issues.

So though his vertigo, as claimed by the plaintiff, was permanent after the 2016 accident, she also has this admission, from the plaintiff's counsel, that he was having these issues before the accident. Again, inconsistencies that warranted further investigation.

We also heard about Dr. Weakland's record, and Mr. Wampold

showed this to you during his summation. This is the December 1st, 2015, record. They didn't note to you that Dr. Weakland even noted out that he was having residual processes a bit slower. Again, a recognition by Dr. Weakland that there were issues that Mr. Hopkins was still experiencing prior to the 2016 accident.

While it appears that he made a significant recovery from the 2011 accident, he was not back to normal. He had residual problems, as noted by Dr. Weakland, and as we saw, during the course of this trial, noted by Dr. Stobbe, who noted that his balance issues had plateaued and would impact him for the rest of his life.

We've heard about that objectively from the plaintiff himself that he was not able to return to work at any point in time following the 2011 accident. If he was back to normal, if he had no residual issues, why does it show up in the medical records? Why didn't he go back to work? Why was it that he continued to go on sailing trips, or boating trips, as he describes it. It just doesn't add up.

More importantly, as it relates to this case, it raises issues about whether and how serious Mr. Hopkins' vertigo was, as well as what role his lifestyle choices were playing and contributing towards it.

So that brings us to Ms. Gordon's April 17th, 2018, evaluation. And you saw this slide in my opening, and you saw

it during the course of this trial as well. The jury instructions, as I mentioned, tell you that you have to judge Ms. Gordon's evaluation based on what she knew at this time.

She was trying to give equal consideration to both sides, to come up with a reasonable, fair estimate based on these conflicting reports from both plaintiff's counsel and from the medical records.

And here is her evaluation. She came up with a total evaluation. She came up with a total evaluation of \$39- to \$106,000 for generals, and \$81- to \$93,040. So for an overall case value of \$47- to \$115-. That does not include the offsets. That's a pure-value estimate.

This was not a low-ball estimate. This was based on the evidence. It was based on the facts. It was based on the information that had been provided to her by the plaintiff's counsel. This was her best effort to estimate the value of the claim at this time, based on the information that she had.

So when you account for the offsets, which no one has really disputed in this case, you get the settlement range that Ms. Gordon made in this case, \$16,000 to \$84,000, and her initial offer was \$17,340, so, actually, a little bit more than the low end of her range.

But she was not willing to pay \$250,000. Her goal was to start a negotiation that would result in a settlement that was within this range. And you heard Mr. Strzelec and Mr. Hight

both talk about how calculating these damages, in terms of range, is a common practice. This is meeting the standards of custom and industry for these types of claims. She was trying to negotiate. She was trying to get the claims settled at a reasonable price.

So now let's look at the three estimates side by side. We've got Ms. May's February 6th, 2018, estimate, the very good plan, according to Mr. Strzelec. We've got the March 2nd estimate by Ms. Gordon, which is her reevaluation after she's assigned the claim. And then we've got the April 17th, 2018, estimate, so her last estimate after she gets the medical records.

And what we can see is a consistency in terms of the numbers, in terms of the ranges, and in terms of evaluations.

We know the first two estimates didn't have the medical records, but it had some information, and it had information specifically from the plaintiff's counsel, and that same information was available on April 17th, 2018, when Ms. Gordon prepared her estimate for this case.

Mr. Wampold told you during his summation that Ms. Gordon never did this, that she never prepared these kind of estimates. That's just not true. The evidence shows that she did. She calculated specials, she calculated generals. We heard from Mr. Hight, this was common practice in the industry for her not to break it out by these individual numbers, as Mr. Wampold did

during his summation. This is how they do it in the industry.

So in terms of timeliness, going back to our timeline, we're at April of -- April 20th, 2018, and we see that Integon received the UIM demand on April 3rd. And so they've responded now, by April 20th, a call to Ms. Rosato saying, "Hey, let's talk about this claim," but she wasn't in, so she left a message for her.

And then we see on the 24th of April 2018 that she got a voicemail, from Ms. Rosato, to talk more about the evaluation of the claim, and this is where she makes the settlement offer of the \$17,340. And she provided a basis for this offer, the September 21st, 2017, record from Cascade. And she indicates that because of it, they weren't considering these injuries to be permanent.

And Ms. Rosato indicated, "Well, this seems at odds with what Mr. Hopkins has been telling me, but I'll take it do him and I'll discuss it with him, and I'll get back to you about it."

And Ms. Gordon followed it up with an email, where she specifically noted, "Hey, thanks for our conversation. Here's my offer of \$17,300, and here's the basis for it." She was showing her cards. She was laying it out there and explaining why she came up with the evaluation that she did. She wasn't trying to hide anything from the plaintiff in this case.

So then Ms. Rosato goes and talks to Mr. Hopkins and

provides this response with regard to the September 1st, 2017, record.

"They got it wrong. They must have confused the timing; must have been a mistake in my medical records." Again, the theme that we heard, throughout the course of this trial, is that they think this record is wrong, but yet they've produced nothing -- no witness, no evidence -- to show that Ms. Emami's recollection of the events on that day was incorrect.

It also applies to medical records, not just this

September 1st, 2017, record, but also Dr. Taylor's April 20th,

2017, record, where all of Mr. Hopkins' symptoms had resolved,

except for some of the vertigo, and Ms. Grove's and Dr. Eaton's

record from around the same time, June of 2017, where they both

reported that his headaches were gone. We heard the same

themes: These must be mistakes, they didn't ask the right

questions. This is further evidence of the uncertainty

regarding the permanency and causation of Mr. Hopkins' symptoms.

So we go to May, early May 2018. You can see from this note that Integon's plan, despite these inconsistencies in the medical record, was to continue negotiating the settlement of the UIM within the authority provided.

You heard Ms. Gordon testify that she had the authority of up to \$75,000, and this was in addition to the \$10,000 PIP and the \$25,000 from Progressive. So she sends an email to her supervisor, Mr. Chodacki, saying, "I got this response from the

plaintiff's counsel. They think this September 1st record is in error. I suggest we continue to negotiate within this amount."

So Mr. Chodacki responds, and he enters a note saying, "Yeah, I'm in agreement with you. I think that you should continue to investigate and continue to negotiate, but I also think you should do a records review to address the causation and the apportionment issues." And as we saw throughout this course of this trial, that's exactly what happened.

So right after this exchange with Mr. Chodacki, Ms. Gordon calls Ms. Rosato and says, "Hey, we're still analyzing causation and wanting to have the records reviewed. We can make another offer, if you want to continuing negotiating with us," at that time, and Ms. Rosato responds, "Why don't you just wait until after you've had this records review done before we continue to negotiate?"

What's notable is, there is no evidence and there's no notation in these notes that there was any complaints, any objections, no letters from Ms. Rosato or anyone else on behalf of the plaintiff in the following weeks saying, "Hey, you're taking this investigation in the wrong direction. We don't think this records review is a good idea." Nothing. At no point, during this period of time, did we hear from the plaintiff's counsel that they thought this was a bad idea.

THE COURT: Mr. Harris, we need to find a place to let the jurors stand up and take a stretch.

MR. HARRIS: I think we can do that now.

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2 THE COURT: Thank you. Ladies and gentlemen, let's 3 stand up and take a stretch, please. 4 (Off the record 11:54 to 11:55 a.m.) 5 THE COURT: All right. Mr. Harris, you may continue. MR. HARRIS: Thank you, Your Honor. 6 7 So what we see at this point in time -- and Mr. Wampold 8 mentioned this to you during his summation -- we see Ms. Gordon 9 reaching out to Mr. Wilson, a local attorney, to get 10 recommendations for a doctor to do a records review. We've seen 11 extensive efforts, multiple emails, phone calls with Mr. Wilson, 12 to find a qualified doctor with the appropriate qualifications 13 and certifications -- a neurologist, in this case -- to complete 14 the records review. 15 So we see the amount of activity that's going on during 16 this period of time from when we get the demand letter, which 17 was dated in late March but not received until early April. We had this series of phone calls, emails, going back and forth, 18 19 trying to coordinate this records review so that everybody is on 20 the same page in terms of they know what's going to happen. 21 Ms. Rosato knows, Ms. Gordon knows, Mr. Wilson knows. 22 all trying to work together to try to get the investigation to 23 move forward so they can resolve the UIM claim. 24 And this shows the plan, the investigation that was

performed, in terms of first reviewing the material that was

provided, preparing the initial evaluation regarding the claim value, communicating with the plaintiff about the claim value and explaining the basis for that evaluation, collaborating with the plaintiff to get a plan in place for how they were going to break through this logjam -- because one side was at one number, the other side was at a different number -- and they had issues about causation, how were they going to break through to try to come to a common ground to settle this claim, and then, fifth, executing this plan by having Mr. Wilson provide recommendations for neurologists that are local that can perform this work and, if needed, perform an IME down the road or do other investigation if it's warranted in the future.

Again, Ms. Gordon is not sitting by idly, as Mr. Strzelec testified. She was working the case. She was trying to get it to a position where it could be settled.

By mid June, Ms. Gordon was having some difficulties finding the appropriate expert, and she continued to follow up with Mr. Wilson. There are other notations in the claim file -- that you can review during your deliberations -- showing the multiple and regular efforts by Ms. Gordon to get Mr. Wilson -- to work together with him to find an expert to do the records review.

So this is a notation that Mr. Wampold didn't show you during his opening. He showed you one that comes a lot later.

But in terms of emails going back and forth and this phone call

that occurs on June 28th, 2018.

And we talked about this with Mr. Hight. We ended up talking about this at the very end of the day -- I don't remember -- the very end of the day on Friday last week. This notation indicates there was a phone call on this date, on June 28th, where Ms. Gordon talks to Ms. Rosato, provides the status to Ms. Rosato, and they have a conversation about a neurologist or a neuropsychologist. And it's Ms. Rosato who says, "Well, I think you want a neurologist, since it is a vestibular issue versus a TBI." And so Ms. Rosato not only agrees with the course of the investigation, but she's, actually, participating in the investigation. She's helping direct the investigation in terms of who is the appropriate doctor to have a records review done to further the investigation.

So based on this, Ms. Gordon calls Mr. Wilson right after this and says, "Hey, let's look at neurologists instead of neuropsychs. Let's change what we're looking for in terms of a records review. I want to have the right expert with the right credentials in place to do this records review."

So we're at a few weeks later, and we're still waiting on neurologists recommendations, and they're still trying to find out who is the right expert, who is available, who has the time to do this. And so she receives a long list of names:

Dr. Reif, Dr. Rockwell, Dr. Braun, and Dr. Kutsy. And she starts calling around. She calls Dr. Reif, and Dr. Reif says,

"Well, we're not booking for another four months right now, in terms of this, so it's going to be a little while." And Ms. Gordon knows it's kind of been a little while and she needs to get this going, she needs to move this forward, and so she reaches out to Dr. Kutsy and says, "Hey, are you available? Can you help me out with this claim?"

The same day she gets an email from Ms. Rosato -- and Mr. Wampold told you this during his summation -- asking for a status and saying, "Hey, have you selected a neuro, and what's going on?"

And so Ms. Gordon said, "I advised Ms. Rosato I hope to select a neuro and send out file materials by the end of this week." And we know this because we had this email to Ms. Rosato from Ms. Gordon in late July 2018, saying, "Good afternoon, Ann. I've been in contact with some neurologists. I'm hopeful to make the decision soon. I appreciate your patience," acknowledging this is taking some time, but they want to go in the right direction. They want to get the proper doctor to do the records review. They don't want to rush it. They want it done right.

Again, no objection to this records review by Ms. Rosato at this time; no indication that an IME should be performed; no request by Ms. Rosato to interview Mr. Hopkins or any of his doctors or his family; an acknowledgment, an agreement, that this is the plan going forward and that, Once this is done,

we're going to continue negotiating settlement after it's all done.

So we see this pattern, these multiple communications during this period of time, keeping Ms. Rosato informed of what's going on, keeping them updated with regard to the status of the investigation.

And then going back to August 1st, Ms. Gordon finally gets ahold of Dr. Kutsy, the next day. Based on the response of his, it looks like Dr. Kutsy has time and is available to do this. He has the qualifications. He's board certified in the appropriate specialty, neurology, so she decides to hire him, and one week later, Ms. Gordon sends the materials to Dr. Kutsy.

As you heard during trial, Ms. Gordon didn't just send the medical records that she received from the plaintiff's counsel. She provided the demand letter as well so that Dr. Kutsy could see these are the allegations that the plaintiff is making, here is what they're seeking in this case.

She also provided photos of the accident and the repair estimate so that Dr. Kutsy could understand the forces that were involved in the accident. As you heard Dr. Kutsy talk about, that was an important part of his evaluation regarding the medical -- based on the medical literature for recurrent concussions in low-force car accidents or low-force head blows following a prior concussion.

And Ms. Gordon didn't just stop there. She also

provided -- and I think this is very significant -- a copy of the email that she got from Ms. Rosato that indicated that September 1st, 2017, record was in error. She wasn't trying to skew Dr. Kutsy's opinions by withholding this record from him. She wanted a real second opinion based on the same information that she had, that she was looking at, with regard to the value of the plaintiff's UIM claim.

This is the very definition of good faith and equal consideration for the insured's interests.

It shows that she was trying to get to a fair and unbiased opinion from Dr. Kutsy, given the discrepancy in the medical records and the further discrepancies based on the statements that were given to her by plaintiff's counsel with regard to the September 1st, 2017, record being erroneous.

So a few days later, Ms. Gordon received confirmation that Dr. Kutsy had received the documents, and she sent a reminder, a diary, to follow up with Dr. Kutsy's office about the report.

And then a few weeks later, she gets the report. She takes a look at it, she reviews it, and then she summarizes it in her notes, and she noted Dr. Kutsy's opinions: One, Mr. Hopkins did not sustain a concussion as a result of the 2016 accident.

And you heard Dr. Kutsy explain that yesterday during his testimony. He testified that he disagreed with any diagnosis of a concussion, including Dr. Weakland's diagnosis, given a lack of objective findings, objective evidence to support a finding

of a concussion. No loss of consciousness, no amnesia, no alteration of speech or behavior.

Dr. Weakland's record -- and you can see this during your deliberations -- of April 25th, 2016, also notes that Mr. Hopkins exhibited no signs of certain clear symptoms that are diagnostic for a concussion. No confusion in terms of knowing the date, the place, or the President. He knew the doctor's name, he had no alteration of recall abilities, and had no reports of any sleeping problems.

Dr. Kutsy, like all the other medical records provided, reviewed it, considered it -- it's in his report that it was a record that was provided that he reviewed and analyzed in forming his opinions.

We also heard from Ms. Montes. Ms. Montes was at the accident scene, right after it happened, and she testified that the plaintiff exhibited no signs of being dazed and confused, that he did not have any nausea or any vomiting that she witnessed at the time.

And she also testified about the forces that were involved in the accident. She testified about how she was stopped, and then she went forward and then impacted Mr. Hopkins' vehicle. And as the photo that you saw, from Mr. Wampold during his opening, shows her hood was bent up a little bit, and that's because it got caught underneath the spare-tire cover of the back of Mr. Hopkins' vehicle. But what you don't see on

Mr. Hopkins' vehicle is any markings, really on the bumper.

Ms. Montes' car never actually got to the bumper. At least you can't visibly see anything, which indicates the only part that they impacted was the hood hitting the back of the tire cover.

That is low impact, low forces, and that was part of the basis for Dr. Kutsy's opinions that this kind of accident, based on the forces, could not have caused a concussion.

We also have Mr. Hopkins' own police report that was filed, not just the day after but two weeks later, where he indicates that his injuries from the car accident were minor.

Dr. Kutsy's second opinion had to do with vertigo, and he explained how plaintiff may have suffered some BPPV, benign paroxysmal positional vertigo, gravitational vertigo, but it should have resolved within three months, which is the common standard for the resolution of this type of vertigo.

He also discussed how the medical reports indicate some reports of vertigo in 2016, and occasionally in 2017, but the reports changed, and they, really, start talking more about dizziness, disequilibrium, and balance issues. Given the low impact of this car accident, along with natural aging, Dr. Kutsy could not attribute these balance issues or the disequilibrium to the 2016 car accident.

He noted there was no clinical evidence of a concussion or any objective testing, including the battery of tests that were available to diagnose a problem with the inner ear that were performed. So given that, there was nothing objective in terms in terms of diagnosing the cause of this disequilibrium.

You heard from Dr. Kutsy that that lack of objective testing was an important factor, an important consideration based on the medical and scientific standpoint that there was insufficient evidence to attribute these symptoms to the 2016 accident.

He also noted the gaps in treatment, boating trips, the trip to Panama, which all suggested, in conjunction with the medical records, that his symptoms were resolving, and that, except for this vertigo and some of this dizziness he was experiencing, he was improving and getting better.

So based on Dr. Kutsy's report, Ms. Gordon made the determination to increase to the offer to \$40,000, and for Mr. Wampold to say, "Well, this was based on a number of days and this is how she was calculating it," well, that's not exactly how it works.

What she was doing is she was saying, "Okay, we had this issue of the vertigo, and we had this range of potential damages, if there is a vertigo that exists." And so she said, "Okay, given the fact that we've got some vertigo here, how am I going to the calculate this? How am I going to come up with more money for Mr. Hopkins to try to settle this case, to try to move the negotiations further," as she indicated before she wanted to do.

You from heard her -- we talked about it earlier in terms of her claim notes -- that the basis for her increasing her offer was Dr. Kutsy's report that at least some of the vertigo was attributable to the accident, but there were questions about causation and about permanency with regard to the vertigo, overall, after that period of time.

You also heard Ms. Gordon testify that at no point prior to this lawsuit was she provided with a copy of this report. I mentioned this to you earlier. This could have been another piece of evidence that she could have considered and Dr. Kutsy could have considered with regard to permanency. But without this report, there was nothing. There were no declarations, no statements, no evidence whatsoever from Dr. Taylor that she considered these injuries to be permanent.

I mentioned to you earlier, you have to judge Ms. Gordon and her actions based on what she had and when she had it, not on what subsequently occurred, what was prepared later, and what was provided later.

When combined with Dr. Kutsy's report and his opinions, Ms. Gordon had nothing more than plaintiff's counsel's unsubstantiated assertion that the vertigo was permanent. He had no medical record establishing that fact.

You heard from Mr. Strzelec that she's not permitted to speculate or guess or take blind assertions as being true. She has to investigate the facts and the documents to see where that

investigation leads and what it shows.

Based on what she had at that time, she was reasonable to believe that the plaintiff did not have a permanent injury as a result of the 2016 car accident.

So given that, we have to look at the reasonableness of the settlement offer. When you consider the offsets for the PIP and the \$25,000 from Progressive, her offer, the increase to \$40,000, constituted a \$75,000 assessment of the overall value of Mr. Hopkins' claim.

You also heard Ms. Gordon testify that she was willing to offer more money to resolve the UIM claim. You saw this from the claim notes and the approval from her manager, Mr. Chodacki, that she could settle this claim within her authority. And had she gone up to the top end of her range, at \$84,000, she would have paid a total of \$119,000 to settle this UIM claim.

But plaintiff was unwilling to negotiate. Ms. Gordon was willing to negotiate. She tried. She made two different offers to try to get this claim resolved at a reasonable value. You heard from both Mr. Hight and Mr. Strzelec. This process of negotiation is common and standard in the handling of UIM claims.

But let's talk about the specifics and the claims that you're going to be asked to decide as you begin your deliberations in the jury room, or the Zoom jury room as we're going to refer to it, and though it relates to the

extra-contractual claim, the other claims, I want to start by talking about a couple of things regarding coverage.

The first one is that Integon, at no point in time, ever denied coverage. It always admitted that it owed UIM coverage to Mr. Hopkins. They never disputed it.

They made two offers to settle the UIM claim and it paid all the medical bills, and all the damage to Mr. Hopkins' car was paid for my Progressive.

Question 1 of the verdict form you're going to get asks you to enter an amount for the damages that were sustained as a result of the 2016 car accident. We ask that you award the \$10,000 in PIP, the \$25,000 from Progressive, the \$1,069 for the car, along with the \$84,000 that was offered within the range that was established by Ms. Gordon, for a total of \$120,069.

As to the other claims, the first one, negligence, we talked about this a little bit at the beginning, but it asks you whether Integon breached a duty of care. As I mentioned before, this is based on a standard of reasonableness. Would a reasonably prudent person act in the same manner, under the same circumstances, based on the same information as Ms. Gordon and others at Integon had at that time?

After consideration of the evidence and the testimony in this case, my client asks that you come back and return a verdict and answer this question no, that Integon was not negligent in this case.

The next claim is bad faith, and it has a very similar standard. Did they act unreasonably, frivolous, or unfounded? I explained these concepts to you a little bit during my opening, and we heard from Mr. Strzelec and Mr. Hight about the reasonableness of my client's conduct in this case, how it's common in the industry to negotiate and to handle claims, and to work cooperatively with the other side. The question you're going to be asked is whether that was unreasonable, frivolous, or unfounded.

And I showed this to you in opening, but here's my take on the definitions of these terms: Unreasonable, meaning without reason; frivolous, meaning baseless; unfounded, meaning unsubstantiated.

Again, perfection is not required. No one is perfect. That's why pencils have erasers.

These are people. These are people handling claims. These are people trying to do the best they can to evaluate this claim with imperfect information, and not all the information at times.

You can't take Ms. Gordon and Integon, put them under a microscope, and say they could have done this and they could have done that. That's not the standard. They're not required to be perfect. They had a reason and a basis for doing what they did, and they were trying their best to resolve this claim.

The court has provided you this instruction with regard to

the duty of good faith. It instructs you that what they had to do is deal fairly with Mr. Hopkins. They had to give him equal consideration.

You heard from Mr. Strzelec that equal consideration meant 51 percent to 49 percent. They didn't have to give him every benefit of the doubt. All things being equal, they had to go with the policyholder, but they could also consider their own interests. It's a very narrow balance in terms of the interests in this case.

Did they take Mr. Hopkins' interests into consideration?

We can see from the claim files, the information that Ms. Gordon evaluated, reviewed, provided to Dr. Kutsy, they did. They gave equal consideration to his interests, and they were trying to reach a reasonable and appropriate settlement value in this case.

Based on the evidence and the documents and the witnesses you've heard in this case, we ask that you return a verdict of no, and find that Integon did not act in bad faith in this case.

As to IFCA, it's another question on the verdict form you're going to be asked to answer, and it asks you, "Did Integon unreasonably deny payment of benefits?" A little more specific, but really it's kind of the same question that we talked about with regard to bad faith, with regard to negligence.

Based on the testimony and for the same reasons I've

mentioned to you before, my client asks that you return a verdict of no on this claim as well and find they did not violate IFCA by not unreasonably denying payment of benefits to Mr. Hopkins.

And then, lastly, to the CPA. This one asks a series of questions, and Mr. Wampold went through those, but, first, one question you're going to be asked is to look at the communication with Ms. Rosato in this case. And I previously went through the communication already. I showed you how Integon responded to various communications, sometimes that same day, but, typically, within a couple of days after they received it, and once the UIM demand came in, how Integon reviewed it. They submitted a timely and appropriate response, and at no point was plaintiff's counsel unaware that Integon intended to complete a records review and provide a settlement offer. There is now evidence in this trial that's been presented to the contrary.

My client asks that you find in its favor as to this part of the CPA claim.

Second, you're going to be ask to decide if Integon promptly provided a reasonable explanation of the policy.

There is no evidence that the plaintiff's counsel in this case did not know that UIM coverage existed or what benefits were available, and the only issue is the explanation of the settlement offer.

You saw from the email I provided to you that Ms. Gordon not only provided the amount of the settlement offer, but she provided the basis. She explained what she was doing; that she was relying on this record from September 1st, 2017, that was inconsistent with other information she had received. But she was told and provided an explanation for the coverage that was being provided under the policy.

Based on that, my client asks that you find in its favor and answer this question "no" as well.

The next two questions as to the CPA asks whether Integon failed to adopt or implement reasonable standards for prompt investigation, and whether they performed and conducted a reasonable investigation, really focusing on the investigation that was performed.

As to the first question, there is no evidence that's been presented regarding the standards that Integon had for a prompt investigation; thus, there's nothing really for you to decide on whether those standards are reasonable or not.

As to the investigation, as I've mentioned to you and we've talked about during the course of this trial, the investigation was reasonably prompt and plaintiff's counsel was kept informed the whole time.

The concept of the records review versus the IME was discussed at length during the course of this trial. Mr. Hight testified that the decision to do a records review instead of an

IME was reasonable.

Integon's decision to do this did not foreclose the possibility that it could conduct an IME at a future date or take other steps to further its investigation had this lawsuit not been filed when it was.

The idea of interviewing plaintiff and his medical providers, as Mr. Hight testified, is not a common practice in the insurance industry. That's not part of a reasonable investigation. Could it have been done? Yes, but it's not a matter of minimum claim-handling standards and practices. It's not done in every case. In fact, Mr. Hight said it's rarely done in these types of cases.

It was not unreasonable to do it at the outset of this investigation, and it was certainly not unreasonable to not do so until after the records review was completed, given the agreement and the collaboration with plaintiff's counsel that this was the appropriate first step for the investigation.

Lastly, you heard from Mr. Strzelec, who said he had no problem with the investigation in terms of the decision to have a record review done. And they all agreed that a neurologist was the appropriate doctor to conduct the records review.

Lastly, as I mentioned, there is no indication, no evidence whatsoever of any objection, any letters, or emails saying, "Maybe you should be doing this, maybe you should be doing an IME, maybe you should be calling plaintiff's doctors." None of

that exists in this case.

At no point was it even suggested to Integon that they should be doing anything else other than what they were doing.

Therefore, as to these two questions regarding the investigation, my client asks you to find in its favor and answer "no" to both of these questions.

The last two questions regarding the CPA asks about the settlement efforts and whether plaintiff was offered substantially less than the value of their claim.

As I mentioned before, Integon, on two separate occasions, tried to settle this claim. Even after the initial offer was rejected, Integon asked plaintiff's counsel, "Hey, do you want us to make another offer?" They said, "No, let's do the records review first, and then we'll talk more in the future." That was the plan that was agreed upon. Based on the information that was provided, what Integon knew at the time, their efforts to try to settle the claim were equitable and fair at that time.

Therefore, based on these questions, my client asks that you answer "no" as well, that Integon did not violate the Consumer Protection Act in this manner.

So in conclusion, my client does not dispute, nor have they ever disputed, that plaintiff is entitled to UIM benefits. I've suggested a number you should award for those benefits, but that really is up to you to make that determination as to what amount of damages Mr. Hopkins suffered as a result of the 2016

accident. 1 Integon's conduct, however, was reasonable at all times. 2 3 It didn't breach any duties to the plaintiff, it didn't act in bad faith, it didn't violate any of the statutes at issue. At 4 5 all times, Integon, and its people, were striving to do their 6 best to accurately and appropriately evaluate this claim. 7 You should find for my client on all the other claims at 8 issue in this case. 9 I want to thank you for your attention, your dedication, 10 and your time. You are what makes our system of justice work, and I appreciate your contribution towards it in this case. 11 12 THE COURT: Thank you, Mr. Harris. 13 Ladies and gentlemen, I'd like to talk with you as the jury 14 for a second. Would you please unmute yourselves? 15 It's now 12:23, and we ran into our lunch hour, and I want 16 to make sure that you can concentrate on what is yet to come, 17 which is about another 30 minutes of a rebuttal. If I cut your luncheon a bit short, to 1:10, does that 18 19 still give you enough time to eat and come back to us? 20 JUROR: Yes. 21 THE COURT: Yes? No? 22 JUROR: Yes. 23 THE COURT: All right. Then that's what I'm going to 24 ask that you do. I don't expect you to gulp down your lunch, 25 but if you would eat quickly, get a little stretching in, and

1 come back, and we will finish up, and begin at 1:10. You may be 2 excused. 3 THE FOLLOWING PROCEEDINGS WERE HELD OUTSIDE THE PRESENCE OF THE JURY: 4 5 THE CLERK: All the jurors are in the jury room. THE COURT: 6 Okav. 7 I'm sorry, Mr. Wampold, I just can't push them that hard to 8 pay attention for another 30 minutes. 9 MR. WAMPOLD: I agree with that decision, Your Honor. 10 THE COURT: Okay. Then let's come back at 1:10. 11 Is there anything else we need to take care of before then? 12 MR. WAMPOLD: Not from us, Your Honor. 13 MR. HARRIS: No. Your Honor. 14 THE COURT: Okay. Have you gone over the exhibits 15 with Mr. Cogswell so you're ready to certify to me that 16 everything that is in the Box should be there, and there isn't 17 anything there that they will have access to that's not supposed to be there? 18 19 MR. WAMPOLD: That's my understanding. 20 understanding is that happened late last night and early this 21 morning. 22 THE COURT: Okay. Then we'll see you at 10 minutes 23 after 1:00, please. 24 MR. WAMPOLD: Sounds great. Thank you, Your Honor. 25 (Court in recess 12:25 p.m. to 1:11 p.m.)

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THE COURT: Good afternoon, counsel. Mr. Gahan, are
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    you doing the mop-up here?
 3
              MR. GAHAN:
                          Yes.
4
              THE COURT: All right. No more than 30 minutes?
 5
              MR. GAHAN:
                          Yes.
6
              THE COURT: Do we have our jurors back, Mr. Cogswell?
 7
              THE CLERK: Your Honor, this is Lowell. Grant just
8
     sent me a Skype. He is stuck in the breakout room.
9
              THE COURT:
                           Okay. Ms. Williams, can you check and see
10
    how our jurors doing?
11
              THE CLERK:
                           I will.
12
              THE CLERK:
                           Okay. I'm back, Your Honor. Sorry.
13
              THE COURT: Mr. Cogswell, you were imprisoned in a
14
     breakout room?
15
              THE CLERK: Yes, and then I couldn't get back on Zoom.
16
     Some of the jurors texted me and said they're experiencing the
17
     same issues. Let me check.
          All right. Your Honor, all jurors are in the breakout
18
19
     room.
20
              THE COURT: Let's bring them back, please.
21
                   THE FOLLOWING PROCEEDINGS WERE HELD
                       IN THE PRESENCE OF THE JURY:
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23
              THE COURT: All right, ladies and gentlemen. Good
24
     afternoon. This is the homestretch. I'm asking you to give
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    your kind attention to Mr. Gahan. He has the privilege of
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giving rebuttal argument on behalf of Mr. Hopkins.

Mr. Gahan?

MR. GAHAN: Thank you, Your Honor.

PLAINTIFF'S REBUTTAL ARGUMENT

MR. GAHAN: Throughout this trial, Mr. Harris has used the phrase, "strive to do their best," to excuse or explain what Integon did here. And there is a sense in which I agree with him. Integon strove to do their best. The problem is, they strove to do their best for Integon.

I want you to think about every decision tree that Integon has faced in this case, every opportunity since they received that demand letter to make a decision about what they were going to do next, and I want you to ask yourselves whose interest was Integon looking out for, because Integon is not allowed to strive to do their best for Integon.

Remember, this is back in March, April, May, June, July, August, September, October 2018. There's no trial. They're supposed to be on the same side.

Mr. Hopkins went out and bought insurance and was the policyholder for this insurance with the understanding that his premiums were going to go to -- if he was ever injured and a driver that hit him didn't have enough insurance -- that his premiums was going to go to the evaluation of his claim so he could work together with his insurance company to find out what his damages were, and he could get paid.

That's what he thought he was paying for, and that's what was supposed to be happening during this window. It wasn't supposed to be adversarial. You're not supposed to be saying things in the claim notes that say stuff like, "Things that are good for Mr. Hopkins are weaknesses for us, and things that are bad for Mr. Hopkins are strengths for us." "There is a downside to getting an in-person medical evaluation because then we'll have to disclose it." That is not being on the same team. That is not equal consideration. That is not working for your customer, Mr. Hopkins.

And that's the context that we're in. Don't let the fact that this trial has an adversarial nature to it, don't let the fact that, at this trial, it's Mr. Hopkins versus Integon make you think that that's how it was supposed to be back in 2018, because it wasn't.

And even though Integon's records draw these clear lines in the sand and are thinking about trial when they were supposed to be thinking about how to evaluate the claim, that doesn't mean that they were following Washington State insurance guidelines, and it certainly doesn't mean that they were within Washington law.

If Integon strove to help Integon, to the detriment of their policyholder, then they violated the CPA, they violated IFCA, they violated their good-faith obligations, and they committed negligence.

But I know that that's not what Integon is really saying, right? They're not really saying "we strove to do the best for ourselves." What they're saying is, "Ladies and gentlemen of the jury, Integon tried really hard, and that's good enough."

And then when Mr. Harris made that argument -- he made it in opening, and then he came back and he made it in closing, and he paired it up by saying that we're trying to change the standard, that we're trying to hold Integon to this impossible standard of perfection. And all I could think of is, well, wait a second. The standard that we talked about was fair and reasonable. The standard that we talked about was equal consideration. We certainly talked about those, and that's an important one, right, equal consideration? Because, if you remember, Mr. Hight didn't believe that equal consideration applied, and when he evaluated this case, didn't apply equal consideration at all, and, in fact, was critical of Mr. Strzelec for saying that equal consideration applied. And all of you know that that's exactly the standard that applies here.

But Integon says that we're using the wrong standard and that the real standard, that they've cut out of whole cloth, is strive to do your best. Well, what's the problem with that standard? Well, first of all, it's completely subjective, right? All you need to win on that standard is have someone say, "Well, maybe I wasn't great, but I tried really hard." All you need is to get some expert to come in and say, "Yeah, I

looked at this, and, yeah, it looked like they tried hard."

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The imbalance of power here is overwhelming. that. This is an insurance company versus an individual, and that's why, as Mr. Wampold argued in his closing, the law has to be so adamant, so clear, and so forceful -- and that's why there's so many avenues towards compensation for Mr. Hopkins. It's because of this acknowledgment that you don't just have to try really hard. You actually have to follow very specific criteria. You have 30-day windows, you have 10-day windows, you have a duty of equal consideration. You can't make an offer that's so low that it forces your policyholder to sue you just to get fairly compensated. Those aren't vague. Those aren't some amorphous, in-the-air standards that would allow, basically, anybody to pass them. Those are real, etched-in-stone laws and rules that insurance companies have to abide by.

And one of the reasons those are in place is to specifically prevent insurers from pursuing their own profits and then hiding behind this, "Well, we tried our best," because if that was the standard, every insurance company in the country would try to do their best and maximize their profits to the extreme detriment of their policyholders, and that's exactly what Washington law prevents them from doing.

Mr. Harris and Dr. Kutsy emphasized that, what they saw as gaps in treatment -- I think Mr. Harris got up and said a

four-month trip to Panama and --

Look. You're going to have Exhibit 17. Exhibit 17 shows you all the visits that Mr. Hopkins went to. I urge you to look at that. Look at all of his treatment, and tell me if there is a four-month gap in treatment. You know there's no -- Mr. Harris knows, I should say, that, in this document, Exhibit 17-1, there's a few months here and there where Mr. Hopkins did not go to treatment.

And the irony is that, as critical as Dr. Kutsy was about Mr. Hopkins' gaps in treatment and that he used it to, sort of, fuel his opinion, when I asked him questions about the treatment that Mr. Hopkins underwent, do you remember what Dr. Kutsy said? He said, "Well, after three months, treatment was pointless. He didn't need to keep going to treatment because it was clear that his vestibular injury had plateaued, he was never going to get any better, and you can't do anything about it, so why go to treatment?"

Well, if that's true, Dr. Kutsy, if there is no point to have treatment, then why are you critical if Mr. Hopkins does treatment on his boat with his family or at home for a few months rather than come in to physical therapy?

And the reason that they're making that assertion -- and this is something that I think we just have to come out and say, because Mr. Harris has, sort of, soft-peddled this -- it was the undercurrent in Dr. Kutsy's testimony. It was certainly, sort

of, bubbling underneath the surface of Mr. Hight's testimony -- is that Mr. Hopkins must just be a liar.

I mean, really. Mr. Hopkins said, "I didn't have this injury before, and now I have it." Mr. Hopkins went to visit after visit after visit to treat a new injury, when, in 2013, '14 and '15, he hadn't gone to any visits to treat it.

So when they say things like, "Well, why didn't he go to the doctor right away," and, you know, don't mention in their opening that it was actually a Sunday, the day after the collision, and that he went immediately the next business day.

Or when they say things like -- they make a big deal out of this notion that Mr. Hopkins wasn't entirely consistent in his medical record, right? Like, he'll go to physical therapy one day and his headaches are doing well, and then he goes another day, and they're not so good. He goes one day, and he's able to deal with some things a little better than others.

What Mr. Harris is trying to sell to you is that, "That tells us he's lying. We caught him." Because Dr. Eaton did this test and it didn't show as much injury one day as it did another, so it must be that Mr. Hopkins is making all of this up.

There's really no way around that that's their position, because Mr. Hopkins is saying and said under oath and said to all of his doctors and all of his treaters that he had no vertigo before this collision, that it had been completely

resolved by 2013. So their position has to be that he's just not been honest and, in a sense, he's committing insurance fraud.

So I'd like to say a few things about that, but first is, let's just believe him for a second, let's say it's true. If it's true and what Mr. Hopkins is doing is going to these doctors and trying to craft a record so at the end of the day he can get \$250,000, and if he's going to them weekly for two years, why wouldn't he say, "I have headaches all the time"? Why wouldn't he say, "I'm doing way worse." Why wouldn't he say, "Oh, my gosh, I'm way worse than I was back in 2011. I'm just not doing well."

Remember, according to Integon, what he's doing is being dishonest. Well, wouldn't you try to make the best possible record you could instead of doing what every single one of his treaters said that he was doing, which was working his butt off trying to get better and better and better every time and showing signs of happiness when he got better. He was relieved, he was pleased, and his family was, too. When he got to say, "Yeah, my headaches are pretty much resolved because I've been doing all these activities" -- "I've been avoiding activities that might flare it up." When he did all of that, that was all an indicator that Mr. Hopkins is not only going through serious injuries and going through recovery and working hard, it shows that Mr. Hopkins is honest.

Everything that they're trying to do to tell you he's lying by pointing out an inconsistency in the record speaks directly to the veracity of the record. Because if Mr. Hopkins was trying to trump all this up, the last thing he's going to do is acknowledge how much better he's doing. The last thing he's going to do is keep working and keep going. He's going to give up. He's going to give up right away.

But I also want to point out the arrogance of the position itself. You have Ms. Gordon, who has never met him. You have Mr. Harris who only met him after the case was filed to drag him into a deposition. You have Mr. Hight and Dr. Kutsy, who have never met him, and they're making a credibility call on a man they've never met that contradicts not just his family and friends, but treating doctors that have been working with him for years and that work with patients like this, and it's their job to help patients like this. And because it's a brain injury, so much of their job relies on the narrative and the historical record that the patient delivers.

And these doctors all believed him, and they didn't just believe him. They believed in him, so much so that two years later, having not seen Mr. Hopkins in that whole time, having seen other patients, living out their lives in their clinics, doing what they to do help people, they came to court, and they showed up on Zoom, and they told you everything that Mr. Hopkins did for two years to get better and that they witnessed it and

that it was all consistent with everything they did.

And now for Mr. Harris to come in in the same context and have the gall to suggest that Mr. Hopkins was anything but honest, well, that's just Integon doing more of the same.

And it was their playbook from the beginning. From the day they got the demand letter, that was a plot to ensure that Mr. Hopkins didn't know what they were truly doing, didn't know that they were trying to purposefully get a record that they could hide if they didn't like, that all of his statements about what he was going through, his medical records, everything else, that all of that wasn't being measured in terms of how can we make sure that he's being fairly compensated. It was being measured in terms of, "Well, what's a strength for us? What's a weakness for us?" That's how Integon was viewing this.

Does that sound like equal consideration? Does that sound like they're really putting their interest on the same level as Mr. Hopkins? Or does it sound like they're looking out for their own at every step?

And, finally, in response to the subtle but, really, indisputable contention that Integon is calling him a liar, please take a look, when you have a chance, at Jury Instruction No. 33.

That's the jury instruction that says Mr. Hopkins had a duty of good faith towards Integon. And Mr. Hopkins complied with that duty. That means he didn't commit insurance fraud.

That means he didn't lie to his insurance company. That means he didn't try to hold some records back. And that means -- and it's undisputed. It's in your jury instructions, and it was agreed to by Integon -- that Mr. Hopkins complied with every obligation he had in this case. And any suggestion or innuendo otherwise is not part of this case. It's trying to print out a prejudice that has no place in this courtroom.

There was some discussion in closing statement about Dr. Taylor being surprised by the September 2018 report -- I'm sorry -- Mary Gordon being surprised by Dr. Taylor's 2018 September report where she said he's reached maximum medical improvement.

This is new. The notion that Mary Gordon didn't know when she was evaluating the claim that Dr. Taylor said that he had reached maximum medical improvement, that's brand new. Think about it for a second.

I asked Mary Gordon on cross-examination, I said, "You didn't think you had to speak with Dr. Taylor because you already knew all of Dr. Taylor's opinions, right?"

She said, Yeah." That's why she didn't reach out to Dr. Taylor.

And what did Dr. Kutsy say about Dr. Taylor? Remember,
Mr. Harris made big deal that Dr. Kutsy hadn't yet seen the
September of 2018 report. But Dr. Kutsy said it was obvious,
from his review of the records, that Dr. Taylor had said that he

had plateaued, that it was permanent, and it wasn't going to get 1 2 any better. 3 He said he didn't just have to see it from her. He'd seen 4 it in all of Mr. Hopkins' records that he had gone in day after 5 day after day with the same symptoms. And for Dr. Kutsy, it's, like, that tells me he's not going to get any better. 6 7 It's also true that if you look in the claim notes, you're going to see a note, in November, from Ms. Gordon, where she 8 9 knows that there was this evaluation done in September 2018 and 10 makes no effort to ask for it. The reason she made no effort to 11 ask for it is because --12 MR. HARRIS: Your Honor, this document is not in the 13 record. This was removed --14 MR. GAHAN: I'd ask the jury to refer to the evidence. 15 MR. HARRIS: This was removed from the evidence at 16 plaintiff's suggestion yesterday, Your Honor. This document is 17 not in the record. I'd ask the jury to rely on the evidence, 18 MR. GAHAN: 19 and if that's not in there, we can get it in there because it 20 certainly should be in there. 21 The reality is --THE COURT: Mr. Gahan, you need to identify for me 22 23 exactly what exhibit you're referring to. 24 MR. HARRIS: Page 57, Exhibit 200, Your Honor. We 25 removed it last night, when we were going over the final

exhibits, at the plaintiff's request. 1 2 THE COURT: All right. Counsel, we'll sort that out 3 after we conclude the argument. 4 Mr. Gahan, go ahead. 5 MR. GAHAN: Thank you. 6 The point is that Ms. Gordon knew that Dr. Taylor was 7 saying the injury was permanent. There was no question that she 8 knew that. 9 She wasn't contesting that Dr. Taylor said the injury was 10 permanent. She was contesting whether or not she believed that 11 it was permanent, because, remember, if Mary Gordon had any 12 question about permanency, there was a place to get that answer. 13 If she really had some confusion about what Dr. Taylor was 14 saying, she had, in her ability, the opportunity to ask 15 She could have done that. Dr. Tavlor. 16 And Mr. Harris has said, repeatedly, "Well, you've heard 17 testimony that they don't usually do that." Well, do you remember when Mr. Hight said that they do do that? When 18 19 insurance companies do do that is when there's some confusion, 20 when they need some clarification. 21 So what is it that Ms. Gordon needs right now? Well, she's 22 saying that she doesn't believe in permanency, even though she 23 knows, and it's in the record, that Dr. Taylor has said that 24 it's permanent.

She has options. She can ask for clarification from

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Dr. Taylor. She can seek it out through someone else to do a records review or an in-person meeting. She can take any of these steps to answer that question. But don't pretend that she didn't know that Dr. Taylor was saying it was permanent.

I also want to speak to this notion that Ms. Rosato and Ms. Gordon had just come up with plan together and that they were working hand in hand all the way up through until the very end, when the lawsuit was filed. I want to urge you to look at the claim file in this respect.

On April 24th, 2018 -- that's Exhibit 200 at 78 -- that's where Mary Gordon made the offer of \$17,430 (sic). And she said she did it because she didn't believe in permanency, she didn't believe the vertigo was new, based on that single record, and because she believed that he was able to do all the activities that he previously enjoyed.

Now, on May 1st, 2018, the claim file says that Ann Rosato sent an email from Mr. Hopkins explaining the September record that had Ms. Gordon so concerned. And you'll see -- and Exhibit 2, page 42, which I'd urge you to look at, you're going to see that Ms. Rosato says, "We renew our demand for limits if you are going to rely on a single record to deny this demand."

So this concept that Ms. Rosato is saying, "Yeah, this is great, let's keep going this way, we're hand in hand, we're working together," that's just false.

But Ms. Rosato is an attorney. She knows certain things.

She knows that Integon holds all the cards, right? She knows that Integon has the ability and opportunity to investigate the claim in any way that they want. And she knows that what Mr. Hopkins deserves in this case are the policy limits that he paid for. And that's all she can do is provide information and ask for those limits.

And if Ms. Gordon tells her, "Well, look, we want to do a records demand to clear this up," Ms. Rosato can't say, "No, you can't do a records demand, a records evaluation, a records review." Ms. Rosato doesn't have any standing for that. All she can do is maybe say, "Well, if you're going to do a records review, will you, at least, use the right expert? Can you not be looking for an ENT doctor? Can you not be looking for a neuropsychologist? Can you, at least, find the expert that matches Dr. Taylor's specialty?"

And, by the way, the concept that Mary Gordon needed

Ann Rosato to tell her that you didn't actually need a

neurologist to look at records from a neurologist, why is that?

Because Ms. Gordon didn't invest the time and the thoughtfulness

that are required to evaluate a claim honestly. Instead, she

punted, she punted to a self-interested defense attorney to find

her the right expert.

And Mr. Harris kept describing this expert as "very qualified," and she was trying to find someone in that field.

Is that what you saw in the records, that she was trying to find

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someone in that field? What you see in the records is her trying to find someone that will agree to just do a records review but not actually meet him in person. That was the qualification, and that's why it took so long, because that's really hard to find, somebody in any of these specialties that's willing to do that, and that's why she couldn't find him.

Again to this concept that they were working hand in hand. At one point, he said Ms. Gordon had nothing to hide. Have any of us been listening to the evidence in this case? She had nothing to hide?

Well, when she was talking to Ann about needing a records review, Mary Gordon never mentioned, "By the way, the reason I want this records review isn't really to clear up the September 2017 record that I said I was confused about. No. what I'm trying to do is get an evaluation by a doctor, handpicked by an insurance defense attorney, in a way that I can hide the results from you if they're not favorable to us." We know that. in the same record where she actually spoke with Ms. Rosato. Don't tell me she had nothing to hide. Do you think if Ms. Rosato had known that that was the approach that was being used by Integon, at that point she wouldn't have objected? But all she hears is, "Look, we have a confusion about a record and we want it cleared up, so we're going to reach out to a doctor and ask him to do a records review to clear up this confusion." Ann says, "Okay, you do what you have to do, but if you're just

going to come back and offer me something close to 17 grand, don't even make me an offer until you're done." That's just looking out for her client.

You also heard argument about the September 1st, 2017, record, and Mr. Harris, sort of, drew a line. Right? He's saying there's no record that anything was wrong or inaccurate, nothing in terms of evidence to dispute it. And there's -- the truth is, what we had was the testimony of the physical therapist, at that same clinic, that saw Mr. Hopkins 31 out of 33 times. And she said, "No, no, that record is accurate. You just have to understand it in its whole context." That was her testimony. Don't say there was no testimony about that record and no testimony explaining that record.

And read that record again. It doesn't say, "I had this vertigo all the way up until April 23rd, 2016, and then I just kept having it." It said that it wasn't unusual for him because he had it before. And that's uncontested that Mr. Hopkins had vertigo from the 2011 collision. That's uncontested. But he got better from it.

There's no reason to disregard Dr. Eaton's testimony. And Dr. Eaton was clear. If you actually look at his records in their context, all of this makes sense to you. And she also said, "He's been telling me that same thing the whole time." He never said this was new, though. It was new.

And think about it logically, right? You have no records

and no treatment for three and a half years, and then you have records and treatment from the day of the collision. That should tell you something about what he's getting treatment for. It should tell you that he didn't have those same symptoms before, or he would have been going to get treatment for those symptoms before.

Mr. Harris also kept saying that we entered evidence or argument that Mr. Hopkins was back to normal after the 2011 collision. That's not true. We never said he was back to normal. I wish he was back to normal.

Mr. Hopkins took the stand and said, "I got everything back that I could."

Dr. Taylor took the stand and said he has a visible hole in his brain where stuff's missing, and you can't get that back.

Mr. Hopkins said he can't -- after the 2011 collision, he couldn't drive and have music on at the same time.

He, clearly, wasn't back to normal, but he had back everything that he could get back, and that's what makes this injury so devastating is because he got to a point where he could actually hoist the sail again. He could actually engage in those same activities that gave him joy and defined his life, and those were taken away. That doesn't mean that when he takes the stand, he's suddenly not going to have a brain injury anymore and he's going to be able to navigate his own records and defend them when a defense attorney is asking him questions.

That doesn't mean that he's going to be the same Mr. Hopkins as he was in 2010. But it does mean that he had something taken away from him, and this trial is about trying to get that back.

I want to talk about a few things that happened during this trial that are a little more subtle, a little bit of a suggestiveness or innuendo that was occurring during this trial, because I think it's important to see how far Integon is willing to go.

The first is, do you remember when Mr. Harris, in his opening, said that Dr. Taylor uses the word "residual," and when she uses the word "residual," she means that Mr. Hopkins had that back in 20- -- it's an injury that has been sustained since 2011. Do you remember when he said that in opening, which is a promise to you about what the evidence is going to show?

And then Dr. Taylor took the stand and said, "I didn't mean 'residual' meant it lasted all the way to 2011. I meant 'residual' means he's still suffering post-concussive symptoms from the April 2016 collision."

Do you also remember on cross-examination of Dr. Taylor when Mr. Harris said, "And you got these exhibits, Dr. Taylor, and you got them from plaintiff's counsel, and you didn't look at them until plaintiff's counsel gave them to you," and Mr. Wampold had to put the brakes on and say, "Hold on a second. Objection."

Those exhibits were mailed to Dr. Taylor at the behest of

defense counsel, at the behest of the court because we're on Zoom and we have to send the exhibits. Why was he trying to make that look untoward or make it look like we're doing something wrong?

Do you remember when Mr. Harris pulled out the medical waiver and started reading to it -- reading from it and acting like there was some medical waiver that prevented the insurance company from reaching out to the doctors?

Then you had to be instructed by the court that that medical waiver doesn't apply here, it doesn't apply to these facts.

Then Mr. Hight had to admit, "Well, yeah, because this is a UIM policy, they certainly had the right to speak to the doctors." Why is he trying to stir this up and create these insinuations and presumptions that are based on nothing? It's because he knows the evidence in this case is overwhelming.

One more you should look at is the policy, Exhibit 3-3 and 3-5. I want you to see that the standard for the PIP and the standard for the UIM is exactly the same, meaning that they had to find the injuries were reasonable and connected to the collision before they paid, and there's nothing, despite what Mr. Harris said in opening, that changes the standard for PIP to UIM.

The only difference for Integon here was that, for the PIP, it was only \$10,000 that was on the line. When it came to the

\$250,000, suddenly their standard took a sharp turn, and they acted very differently towards exactly the same injuries.

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And, finally, I want to talk to you about the fact that Integon uses its own adjusters and uses its own experts and uses its own doctors and uses its own lawyers to recommend its own doctors.

What have they done here? They've created a citadel. They've created this self-contained little world where, if you're hurt and you go to your insurance company, they say, "Well, we're going to evaluate the value of your claim, but you know what? We're not going to look outside of our walls to We're going to use our own experience and determine the value. the experience of our supervisors, we're not going to look at focus groups, we're not going to look at jury verdicts, we're not going to look at anything else. We're going to use our own experience, and then if our own experience tells us the value of the claim, we're going to make an offer. And if we value it at \$84,000, we're going to make an offer at \$17,000 just to see if you'll bite. And if you don't, we're going to go to our own defense attorney, and we're going to ask our own defense attorney to recommend somebody who will look at this case in the way that we want them to. And then if that doesn't work and you still don't bite, then we're going to hire our own expert, who is going to come in and say that all you have to do is try hard."

Think about how self-contained that is. It's a citadel that's impossible to penetrate. It's a citadel that you can't crash through. But thank God for you. Thank God for these jury instructions and these various claims, because they allow you to breach the walls, and they allow you to say, "You know what? You're not allowed to create this self-serving little universe, where you just rely on yourselves to bolster yourselves and create this world that nobody else can get in."

You have to apply the standards that are in the law, and when you fail to do that, you're going to be held accountable, and that's exactly what we're asking you to do here.

Thank you.

THE COURT: Thank you, counsel.

Ladies and gentlemen, the case is now ready to be submitted to you for your deliberations. So you have your jury instructions. You have a verdict form that is capable of being filled out electronically. You'll have access to the exhibits that have been admitted in the case.

I'm going to ask that you continue to deliberate until you arrive on a verdict. If you haven't done so by the end of today, I'll be asking you to come back tomorrow morning at the same time, at nine o'clock, and continue your deliberations.

And, remember, it's entirely up to you how long you deliberate. That is up to each jury in each circumstances. The court does not tell you how long you should spend on

1 deliberations. That's your choice. 2 So are there any questions about the instructions I've 3 given you so far about how you're going to conduct yourself for 4 the rest of the day? 5 All right. Then you may be excused to the jury room. THE FOLLOWING PROCEEDINGS WERE HELD 6 OUTSIDE THE PRESENCE OF THE JURY: 7 THE COURT: All right. All our jurors in are in the 8 9 jury room? 10 THE CLERK: Yes, Your Honor. Okay. Yesterday, as I understand it, in 11 THE COURT: 12 front of the courtroom deputy, you each certified that all of 13 the exhibits that were needed were in the Box. 14 And we had a discussion -- an objection over Exhibit 200, I 15 believe it was page 58; is that correct, Mr. Harris? 16 MR. HARRIS: Yes. So it's Exhibit 200, and it's 17 page 57. 18 THE COURT: Page 57. Okay. 19 MR. HARRIS: And it's not in the Box because we took 20 it out yesterday at the insistence of the other side, of 21 plaintiff's counsel, and that is the record that was being 22 referenced in closing. 23 MR. GAHAN: That's not correct, Your Honor. It's Plaintiff's Exhibit 1-11. 24 25 THE COURT: Okay. Well, that's a big difference.

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     That's about 200 exhibits apart. Let me take a look at 1-11.
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               MR. HARRIS: Same page, page 57, they asked us to take
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    out of ours.
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               MR. GAHAN:
                           Sorry, counsel --
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                           Mr. Gahan, I'm not following your number.
               THE COURT:
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               MR. GAHAN:
                           If you look at Exhibit 1, page 11, look at
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     the record from November 2018.
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               THE COURT:
                           Yes, I'm seeing that, and it is exactly
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     the same as 200.
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               MR. GAHAN:
                           Okay.
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                           Page 57.
               THE COURT:
                           Right. So this concept that that's --
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               MR. GAHAN:
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     that's a record that I agreed to have withdrawn, obviously was
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     inaccurate.
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          I was relying on my exhibit. The record's in, and I would
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     ask the court to inform the jury of this exhibit number, because
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    he created this false impression that we were relying on an
     exhibit that's not in evidence. It clearly is.
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               MR. HARRIS: We were asked yesterday, Your Honor, by
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     Mr. Gahan's office to remove this page from the exhibit. Why
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     would it be removed from one but not the other? We thought it
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    was not going to be in. That was our agreement. That was what
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    we traded emails about last night. We have the email from 6:43
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     last night from Mr. Gahan's office.
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               THE COURT: Well, look -- Mr. Cogswell?
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THE CLERK:
                           Yes, Your Honor?
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              THE COURT:
                           Can you take a look at the Box?
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              THE CLERK:
                           I have it open, Your Honor.
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              THE COURT:
                           Is Exhibit 1, page 11 in there?
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              THE CLERK:
                           It is page 57 of 365?
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              THE COURT: Yes, page 57 of page 365. It's also
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     Exhibit 1-11. The problem is we've got three different numbers
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     on these.
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          Is that exhibit in, and was that exhibit certified that it
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     would be there?
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               THE CLERK: Let me check the email. Just one moment.
12
              MR. HARRIS: I've got the email from 6:43 last night,
13
     and Mr. Cogswell is copied on it. It indicates that page 57 of
14
     Exhibit 200 should be deleted and that these exhibits of what
15
     should and should not be admitted -- so that should have been
16
     removed from Exhibit 1.
17
              MR. COGSWELL: That is the email I see, Your Honor.
18
              MR. GAHAN: Your Honor, there was no agreement to
19
     remove 1-11. There never was. It is true that there were some
20
     Integon records that were duplicative, there were others that
21
     didn't contain the right redactions, and we sent an email -- I
22
     guess the paralegal sent an email with the understanding that
23
    Mr. Harris and I had received -- had a discussion a while back
24
     about making his claim file smaller, but I've always had
25
     Exhibit 1-11 in. It's always been part of Exhibit 1. We've
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1 used Exhibit 1 throughout the trial. And just because one 2 particular page might be omitted from one exhibit doesn't mean 3 it's automatically removed from all other exhibits. 4 Mr. Harris and I have tried to go through and reduce 5 duplicative exhibits as much as we can. I don't see why I would 6 have -- there was no understanding that 1-11 was ever going to 7 be removed, and I certified that Exhibit 1 was accurate, and so 8 did Mr. Harris. The jury now is under the false impression that 9 we were trying to hide something or that we were relying on an 10 exhibit that's not in evidence, and that's just not true. 11 If Mr. Harris wants to put page 57 back in, I have no 12 objection to that. 13 THE COURT: Mr. Harris, I take it this was taken out 14 at what you believe was Mr. Gahan's request? 15 MR. HARRIS: At the request of his paralegal, yes, 16 Your Honor. 17 THE COURT: So it doesn't hurt you if it's in? always been in? 18 MR. HARRIS: It was in, Your Honor, but we were asked 19 20 to certify this last night. Why would we take it out of one 21 version and not the other? They asked us to take it out of our 22 version, and we did. 23 THE COURT: Well, look. It's been in the entire time. 24 I don't know who's certifying, but the lawyers are the ones who 25 are certifying. The paralegals aren't doing this.

1 But at the time you told Mr. Cogswell that it was all set, 2 it, apparently, was at least in there once. It's going to stay 3 in there once, and that's all we're going to do about it. 4 MR. HARRIS: Okay. 5 Your Honor, would you instruct the jury MR. GAHAN: that Exhibit 1-11 is, indeed, in evidence? 6 7 THE COURT: No, because you, basically, made a point that if it's in there, it's in there, and I said I would sort it 8 9 If they look at either one of those pages, it's there. 10 MR. GAHAN: All right. Sounds good. 11 THE COURT: All right. So a couple of things. 12 Is Mr. Wampold still with us? 13 MR. WAMPOLD: I am, Your Honor. 14 THE COURT: Good. Mr. Wampold, I didn't think you'd 15 already gone out celebrating. 16 MR. WAMPOLD: Not yet. 17 THE COURT: Not yet? All right. I usually -- as you know, in federal court, we do not allow 18 19 the lawyers to speak with the jurors afterwards. And unlike 20 many judges, I do not speak with jurors, except to thank them 21 and receive any comments about the process that they might have, 22 particularly in a case where there still is more work for me to 23 do, and in this case we've got the Consumer Protection Act 24 claim, we've got attorney's fees, so this is not a jury that I

would normally go chat it up with, and I don't do that anyway.

25

But because this is a Zoom case, I'm wondering if you would be willing to participate with me in talking with the jurors about the process, the mechanics, how they felt about the techniques, the instructions that they got. Judge Zilly did that on his case, and I have the transcript of what he did. It would be my intent to have the reporter there while we did it, and we can go over those kinds of issues, for the sole purpose of making sure that each time we do one of these trials, we can build upon our experience.

Is that acceptable to you?

MR. WAMPOLD: Yes, I think that would be great.

MR. HARRIS: Yes, Your Honor.

THE COURT: All right. Then, first of all, I want to thank you for being game. I told you at the beginning I hadn't been this nervous about a trial since 32 years ago when I did my first one, but I think we all made it through, and, from my perspective, surprisingly well.

I know that we have several lawyers that I admitted and that have been watching, and before we say goodnight to one another, I was wondering if there's anything you would like to say to them about how they might prepare or don't do this -- or whatever you want to say.

MR. WAMPOLD: I guess, from my perspective, you know, I want to thank you guys, the federal court, and you, in particular, Judge Pechman, for making this happen, because I

thought it worked remarkably well.

I was surprised how similar to an in-person trial it all went, and I don't think it's, actually, very different from a real trial. So I thought it all went surprisingly well and smoothly.

And there were way less technical issues than I expected. We really didn't have that much downtime. We have more downtime with jurors who are late on a bus than we did with technical issues.

THE COURT: And amazingly, they all showed up on time after lunch and at each break.

Mr. Harris, what did you think?

MR. HARRIS: I agree with Mr. Wampold. I'll be candid with you, Judge. I had some very serious reservations when you told us in late August. I got off that call and said, "Oh, boy, this can be kind of messy."

I read stories online about other Zoom trials, one in California, in particular, and I was very concerned. But I have to give credit to both sides and to your staff, because I think we were able to pull it off, with cooperation on everybody's part and a real commitment to making this work. If we had not bought into this, I don't think we could have pulled this off in this manner.

THE COURT: Well, I think I told you there are some things that are a bit different for me. One, I'm really sick of

1 looking at myself in the face for seven days in a row. And I 2 know I could black myself out, but that doesn't help you when 3 you're trying to read me. 4 Did you feel like you were connected with the jurors? 5 MR. WAMPOLD: I would say not as much as a real trial, 6 but there was some. 7 THE COURT: Okay. And did you think that they were 8 forthcoming in their voir dire? 9 MR. HARRIS: Not as much as normal. 10 MR. WAMPOLD: I just thought they weren't as talkative 11 as normal. It was harder to get a conversation going than, probably, in person. 12 13 THE COURT: Normally, I have a whole shtick that I do 14 with them with the artwork in the courthouse. I tried to give 15 them some prompts for them to talk. We'll find out later if any 16 of that worked, but I might increase that to get them talking a 17 little more along the way. All right. Counsel, as you heard, they're the ones that 18 19 are going to decide, sometime between 3:30 and 4:00, whether 20 they're going to stop deliberating, if they haven't reached a 21 verdict. 22 Would you please make sure you stay in place so that 23 Mr. Cogswell can get in touch with you in case we have a 24 question or in case we have a verdict? And if they don't reach

a verdict, then Mr. Cogswell will send you an email saying

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1
     everybody has gone home and they'll be back tomorrow at nine
2
    o'clock to continue. And we'll go on in that process until we
 3
     get a result.
4
          Thank you so much for your arguments, and, really, thank
 5
     you so much for being willing to try this out. There is going
6
     to be an article written by the Administrative Office of the
7
     Courts about us, and a reporter might give you a call to talk
8
                I told them that I would let them know when we were
9
     done. And so that story is going to run. I don't know when.
10
          And I really -- I really enjoyed your advocacy on all
11
     sides. For a judge to watch good lawyers work is like sitting
12
     back and eating bonbons. So, apparently, I'm food obsessed.
13
    Mr. Gahan liked my strawberries in the dark comment, and now I'm
14
     on to bonbons. It was a good experience.
15
          I have another Zoom meeting at two o'clock, so I'll say
16
     good-bye, and we'll wait on our jurors for the verdict.
17
               MR. WAMPOLD: Thank you, Your Honor.
18
               MR. HARRIS: Thank you, Your Honor.
19
               THE COURT:
                           Thank you.
20
                      (Court adjourned at 2:00 p.m.)
21
                    (The jury was released at 4:00 p.m.)
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CERTIFICATE

I, Nancy L. Bauer, CCR, RPR, Court Reporter for the United States District Court in the Western District of Washington at Seattle, do hereby certify that I was present in court during the foregoing matter and reported said proceedings stenographically.

I further certify that thereafter, I have caused said stenographic notes to be transcribed under my direction and that the foregoing pages are a true and accurate transcription to the best of my ability.

Dated this 11th day of December 2020.

/S/ Nancy L. Bauer

Nancy L. Bauer, CCR, RPR Official Court Reporter